





City and County of the City of Chester

ANNUAL REPORT

TO THE

MAYOR, ALDERMEN AND COUNCILLORS OF THE CITY AND COUNTY OF THE CITY OF CHESTER

On the Health of the City

and the

Work of the Health Department in 1967

BY

D. F. MORGAN, M.B., Ch.B., D.P.H., Medical Officer of Health.

Together with the Report of the CHIEF PUBLIC HEALTH INSPECTOR G. E. JARVIS, F.A.P.H.I., F.R.S.H.





City and County of the City of Chester

ANNUAL REPORT

TO THE

MAYOR, ALDERMEN AND COUNCILLORS OF THE CITY AND COUNTY OF THE CITY OF CHESTER

On the Health of the City

and the

Work of the Health Department in 1967

BY

D. F. MORGAN, M.B., Ch.B., D.P.H., Medical Officer of Health.

Together with the Report of the CHIEF PUBLIC HEALTH INSPECTOR G. E. JARVIS, F.A.P.H.I., F.R.S.H.

INDEX

Ambulance Service						31—35
Animal Boarding Establishm	ient Act	, 1963				64
Atmospheric Pollution	•	• • • •				50
	•	B				
Birth Rate						7
Blind Persons						37
B.C.G. Vaccination	•••					30
		C				
Cancer						8
Care of Mothers and Young	Children	n:				
 Expectant and Nursing Mo 	others					16, 20—24
Family Planning						20
Infant Welfare, Centres						16—18
Premature Infants						7, 18
Dental Care						19
Dried Milk Foods, etc.						18
Unmarried Mothers and th	neir Chi	ldren				20
Cervical Cytology						38
Chief Public Health Inspecto	r, Repo	rt of				47
Chiropody Service						38
Clean Air						49
Common Lodging Houses						64
Cremation						45
Cysticercus Bovis						58
		D				
Death Rate, Causes of and ag	ges at					8—10·
Diphtheria Immunisation						28, 29
		E				
Environmental Hygiene						47
Epileptics and Spastics						38
		F				
Factories Acts						65
Family Caseworker						44
Fluoridation						45
Food and Drugs Act					• • •	53, 54
Food Establishments, Hygier		•••				48, 51—54
Food Inspection, Unsound F	ood					51—59
Food Poisoning	• • •					11
		G				
General Statistics		···			• • •	6
**		H				
Health Committee	•••	•••	• • •			4
Health Officers				:		4
Health Services provided un	ider Na	tional E	lealth S	ervice	Acts	16
Health Centres	• • • •	• • •	• • •		•••	16
Health Education			•••		• • • •	25
Health Visiting	• • •			• • •	•••	24
Home Helps	• • •	•••	•••		•••	39
Home Nursing			• • •			25—27
Hospital Accommodation, Co		ents				22
Housing	• • •		• • •	• • •	• • •	48

INDEX—Continued Ice Cream 56 Infant Mortality 7 . . . Infectious Diseases 11, 12 Institutional Provision for Mothers and Children 20 Laboratory Services 15 . . . Laundry Service ... 38 Licensed Premises 52 Liquid Egg (Pasteurised) Regulations, 1963 56 M Medical Examinations . . . Mental Health Services 39 - 43. Guardianship ... 41 Residential Accommodation 41 39 Training Centres 40 Midwifery Service 21 - 24Milk 55, 56 National Assistance Act, 1948 44 64 Noise Abatement Act, 1960 Notifiable Diseases 11, 12 Notification of Births 23 Nuisances, Abatement of 47 Nursery and Child Minders (Regulation) Act, 1948 21 Nursing Equipment, Provision of 38 21 Nursing Homes ... Offices, Shops and Railway Premises Act, 1963 59—61 23, 38 Ophthalmia Neonatorum Outwork 66 ... 64 Pet Animals Act, 1951 Poliomyelitis, Vaccinations 30 Prevention of Illness, Care and After-Care 36---39 Rodent Control 62, 63 44 Sanitary Inspection of Area . . . Sewerage and Sewage Disposal 45 Slaughter of Animals Act, 1958 57 48 Slum Clearance 38 **Spastics** T 8, 13, 30, 36 **Tuberculosis** 27-31 Vaccination and Immunisation

. . 1

13-15

6 - 10

45, 46

18

Venereal Disease

Vital Statistics

Welfare Foods

Water

HEALTH COMMITTEE, 1967

Chairman:

Councillor Tillie Price

Deputy Chairman:

Councillor A. D. H. James

Members:

Alderman Arthur Charmley
Alderman L. Edwards
Alderman Lt.-Col. H. A. A. Howell
Councillor Florence M. Grogan
Councillor T. H. Tomlins
Councillor W. E. Dutton

Ambulance Officer

Family Caseworker

Councillor R. R. Williams
Councillor J. Bayley
Councillor Rita P. Knowles
Councillor Rosemary C. Martin
Councillor D. O. Elloy
Councillor W. R. Inglis

Co-opted Members:

Dr. W. Gilchrist Dr. W. M. Diggle Col. C. W. Marsden, M.C.

STAFF OF THE HEALTH DEPARTMENT

Medical Officer of Health ... D. F. Morgan, M.B., Ch.B., D.P.H. Deputy Medical Officer of Health Ivy F. Fallon, M.R.C.S., L.R.C.P., D.P.H. Assistant Medical Officers of Health Thelma T. Asfour, M.B., Ch.B., D.P.H. Resigned 30/8/67 Barbara C. Thompson, M.B., B.S.(Lond.), M.R.C.S., L.R.C.P. Shirley Charles-Jones, M.B., B.S.(Lond.), M.Ř.C.S., L.Ř.C.P. 1/5/67—19/7/67 Diana Perry, M.B., B.S., D.C.H., D.Obst., R.C.O.G. 16/8/67-21/12/67 Muriel J. W. Dobbin, M.B., Ch.B. Commenced 11/9/67 Christine M. Cheetham, M.B., Ch.B. Commenced 25/7/67 Chief Public Health In-G. E. Jarvis, F.A.P.H.I., F.R.S.H. spector Principal Nursing Officer ... Miss D. E. Paddon, S.R.N., S.C.M., H.V., Q.N. Re-designated July, 1967 Senior Mental Welfare Officer D. B. Davies Chief Clerk R. W. Hudson Mrs. J. H. Williams Home Help Organiser L. T. Dyer Training Centre Manager ...

Resigned 31/12/67

Resigned 31/12/67

S Chesters

Mrs. B. Smedley

Telephones: Chester 27161

25142

25167

HEALTH DEPARTMENT, ST. MARTIN'S HOUSE, CHESTER. CH1 2BA

The Mayor, Aldermen and Members of the City Council.

Dear Mr. Mayor, Ladies and Gentlemen,

I have the honour to present my Annual Report for 1967.

Yours faithfully,

D. F. MORGAN,

Medical Officer of Health,
Principal School Medical Officer.

GENER	AT	ATS	TICTI	CC
	വ	onv	11011	$c_{\mathcal{O}}$

Area in Acres Population (Registrar Ger Number of inhabited house Rateable Value	neral's es		 	4659 60360 20745 £3394065
Sum represented by a pen	ny rate		•••	£13440
	VITAL	STATIS	TICS	D: 1 D 1 000
Live Births Legitimate Illegitimate Totals	Male 517 62 579	Female 468 42 510	Total 985 104 1089	Birth Rate per 1,000 Population 18.04
Illegitimate Live Births				
Percentage of Total Liv	ve Births			9.5
Still Births				Still Birth Rate per 1,000
	11	12	23	(Live and Still) Births 20.7
Live and Still Births				
Totals	590	523	1112	
Deaths All infants	16	11	27	Death Rate per 1,000 Live Births 24.8
in mants	10	11	2,	Death Rate per 1,000
Legitimate Infants	14	11	25	legitimate Live Births 25.4
Illegitimate Infants	2		2	Death Rate per 1,000 illegitimate Live Births
Neonatal (first 4 weeks)	10	8	18	Death Rate per 1,000 Live Births 16.5
Early Neonatal (under 1 week)	10	7	17	15.6
Peri-Natal				Death Rate per 1,000
(Still Births plus De	eaths und 21	der 1 week) 19	40	Live and Still Births 35.9
Maternal (including abortion)	_	_	_	Death Rate per 1,000 Total (Live and Still) Births 0.0
All Causes	354	384	738	Death Rate per 1,000 Population 12.2
Respiratory Tuberculos	sis 1	1	2	Death Rate per 1,000 Population 0.03
Other forms of ,,	_	_		Death Rate per 1,000 Population 0.0
3	(0	25	146	Death Rate per 1,000 Population
Cancer	69	77	146	2.4

POPULATION AND VITAL STATISTICS

The estimated population, 60,360, is the same as in 1966. Material change is likely only in the event of boundary adjustments.

The Birth Rate 18.04, when adjusted 18.4, compares with the rate for England and Wales of 18.1.

The Death Rate 12.2, when adjusted 13.5, compares with the national rate of 12.2.

Stillbirths 23, give a rate of 20.7 which compares with 15.6 the national rate per 1,000 live births.

Illegitimacy

The following details show illegitimate births as a percentage of total live births each year.

1960		 		 	 5.1
1961		 		 	 6.1
1962		 	•••	 •••	 7.3
1963		 		 	 6.3
1964		 		 	 8.2
1965	• • •	 		 	 8.4
1966		 		 	 8.8
1967		 		 	 9.5

INFANT MORTALITY

The total of infant deaths for the year was 27, giving a rate of 24.8 per 1,000 live births to compare with 19.0 for England and Wales.

Two of the deaths were illegitimate giving a rate of 19.2 deaths to each 1,000 illegitimate live births.

The causes of death of these 23	7 infants	were a	s follow	vs:—		
Prematurity				• • •		9
Congenital Abnormality						9
Acute Infections						3
(Meningitis, Encephalitis,	Bronch	o-pneu	monia,	etc.)		
Gastro-enteritis						2
Other			•••	• • •	• • •	4

DEATH RATE

The total of deaths from all causes at all ages was 738. The Death Rate per 1,000 population was 12.2 which, when adjusted 12.4 compared with 11.7 for England and Wales.

Heart and circulatory conditions accounted for 222 deaths, 30 per cent. of the total.

There were two deaths from Tuberculosis, one male over 75 and one female in the 45—55 age group.

Cancer of the Lung and Bronchus totalled 47 deaths, 35 of these were male and 12 female.

Motor Vehicle Accidents caused six deaths, a big reduction on the 23 for the previous year.

Year	No. of Deaths from Lung Cancer	Per Cent. of Total Deaths	Males	Females
1960	21	3.24	19	2
1961	37	5.30	33	4
1962	35	4.90	29	6
1963	36	5.01	31	5
1964	39	5.75	37	2
1965	30	4.40	26	4
1966	43	6.30	35	8
1967	47	6⋅36	35	12

The Authority is a member of the Merseyside Cancer Education Committee.

į	75 & Over		1
	65- 7 74 C		
ł	45- 64-		1
DT.	25 -	:	1
IAI	15- 24		1
Z E	5- 14		
_			
	er 1		
	Under	: : :	1
İ	Total	1 1 1 1 1 1 1 1 1 1	1
1	75 & Over		Ī
	65- 7 74 0	$\begin{bmatrix} \cdot & \cdot & \cdot & \cdot & \cdot & \cdot \\ \cdot & \cdot & \cdot & \cdot &$	1
	45-	$\begin{bmatrix} 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 & 1 $	
	25- 44		
LE			,
MAI	- 1		
	5- 14		1
	-1 -4	-	
	Under 1 1		1
	Total	1	1
			7ar
		Tuberculosis, Respiratory Syphilitic Disease Diphtheria Diphtheria Diphtheria Diphtheria Neningococcal Infections Acute Poliomyelius Measles Other Inferve. & Parasitic diseases Cancer, Stomach Cancer, Breast Cancer, Uterus Cancer, Uterus Cancer, Other Leukaemia, Aleukaemia Diabetes Vascular Lesions, Nervous System Coronary Disease, Other Other Circulatory Disease Influenza Prouchitis Other Respiratory Ulcer of Stomach and Duodenum Gastritis, Enteritis and Diarrhoea Nephritis and Nephrosis Hyperplasia of Prostate Pregnancy, Child Birth, Abortion Congenital Malformations Other Defined & Ill-defined Dis. Motor Vehicle Accidents Sucide	Homicide and Operations of War
	TH	Tuberculosis, Respiratory Tuberculosis, Other Syphilitic Disease Diphtheria Whooping Cough Meningococcal Infections Acute Poliomyelitis Measles Other Inferve. & Parasitic dise Cancer, Stomach Cancer, Lung, Bronchus Cancer, Uterus Cancer, Uterus Cancer, Other Leukaemia, Aleukaemia Diabetes Vascular Lesions, Nervous Sys Coronary Disease, Other Hypertension with Heart Dise Hypertension with Heart Dise Hypertension with Acute Coronary Disease, Other Other Circulatory Disease Influenza Preumonia Bronchitis Other Respiratory Ulcer of Stomach and Duoder Gastritis, Enteritis and Diarrh Nephritis and Nephrosis Hyperplasia of Prostate Congenital Malformations Other Defined & Ill-defined Motor Vehicle Accidents Suicide	ions
	CAUSE OF DEATH	Tuberculosis, Respiratory Syphilitic Disease Diphtheria Whooping Cough Meningococcal Infections Acute Poliomyelitis Acute Poliomyelitis Acute Poliomyelitis Cancer, Lung, Bronchus Cancer, Lung, Bronchus Cancer, Breast Cancer, Other Leukaemia, Aleukaemia Diabetes Vascular Lesions, Nervous Cononary Disease, Other Hypertension with Heart Heart Disease, Other Other Circulatory Disease Influenza Preumonia Bronchitis Other Respiratory Ulcer of Stomach and Du Gastritis, Enteritis and D Gastritis, Enteritis and D Wephritis and Nephrosis Pregnancy, Child Birth, Congenital Malformations Other Defined & Ill-defi Motor Vehicle Accidents Suicide	perat
	OF	Tuberculosis, Res Stuberculosis, Othe Stuberculosis, Othe Stuberculosis, Othe Meningococcal Indeasles Cancer, Stomach Cancer, Lung, Br Cancer, Lung, Br Cancer, Uterus Cancer, Uterus Cancer, Other Cassace, Moperplasia of Phregnancy, Child Congenital Malfolother Defined & Motor Vehicle Ac All Other Acciden Sucide	O p
	JSE	Tuberculosis, I Tuberculosis, C Syphilitic Disea Diphtheria	le an
	CAI	Tuberculosi Syphilitic D Diphtheria Whooping (Whooping (Measles) Other Inforcancer, Du Cancer, Br Cancer, Br Cancer, Br Cancer, Cu Cancer, Cu Cancer, Dt Cancer, Di Cancer, De Congenital Other De Congenital Other De Congenital	nicid
		The state of the s	
		1.2. 4.4. 4.4. 4.4. 4.4. 4.4. 4.4. 4.4.	36.

VITAL STATISTICS OF DISTRICT FOR 1967 AND PREVIOUS YEARS

Births
954
934
1006
985
1076 17.9
1130
1089

NOTIFIABLE INFECTIOUS DISEASES

The incidence of notified cases generally continues to decline.

There were 269 notified cases of Measles and 28 of Dysentery.

I am pleased to record that again there were no cases of Poliomyelitis notified.

FOOD POISONING

There were 14 cases reported during the year.

A mild outbreak of food poisoning in one of the Council's Homes for the Aged could not be traced to any definite cause.

Clean Food Handbook

Arrangements were made for the publication of a Handbook on Clean Food by a firm of publishers, to emphasise the dangers of lack of hygiene in food preparation. There was no cost to the Authority in this production, which was similar to the Handbook on the Medical Services of the Authority (which has been produced for some years).

Under the PUBLIC HEALTH ACT, 1961, compensation is payable by the Local Health Authority to contacts and cases of Notifiable Infectious Disease who are recommended by the Medical Officer of Health to cease their work temporarily on this account. The total amount thus paid during the financial year was a little over £5

NOTIFIABLE DISEASES DURING 1967

							-						
DISEASE	Under 1 year	1	2	3	4	5—9	10—14	15—24	10—14 15—24 25—44 45—64	45—64	65 & over	Age un- known	Total all ages
Scarlet Fever	1	ı	1		2	6	2	١	1		1		14
Whooping Cough	2	2	4	2	2	9	I	1	_	1	1	2	27
Measles	16	46	36	41	40	75	3	2	1	1	1	6	569
Poliomyelitis—Paralytic	I	1	ı	I	I	I	ı	ı	ı	İ	ı	1	1
Poliomyelitis-Non-Paralytic	1	1	1	I	1	1	I	1	1	ŀ	ı	ı	1
Diphtheria	ı	Ī	Ī	1	1	Ī	I	1	1	1	1	1	ı
Smallpox	Ī	1	1	I	1	I	ı	ı	1	ı	ı	ı	ı
Meningococcal Infection	İ	1	1	1	ı	1	1	1	1	1	ı	1	1
Acute Encephalitis—Infective	I	1	ı	I	I	1	I	ı	1	1	1	ı	1
Acute Encephalitis-Post Infectious	i	I	1	1	I	1	ı	I	1	1	ı	١	1
Dysentery	2	4	3	1	1	∞	_	1	7	1	1	7	28
Ophthalmia Neonatorum	I	1	1	I	I	I	1	I	I	ı	ı	1	1
Puerperal Pyrexia	I	I	1	I	1	I	1	1	1	I	I	1	7
Pneumonia	1	ı	1	1	1	-	1	1	1	ı	1	ı	2
Para Typhoid	I	I	1	1	I	1	1	1	1	1	1	1	1
Typhoid	1	I	ı	1	I	I	i	I	ı	ı	ı	ı	1
Food Poisoning	I	I	1		I	I	I	I	7	3	∞	,	14
Erysipelas	I	1	1	1	1	1	1	1	1	1	1	1	1
Malaria	İ	I	l	1	I	I	-	İ	I	ı	ı	1	-

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1952

The total of new cases notified was seven, as detailed in the following table:—

TUBERCULOSIS

				E W		E S on- ratory	Resp	D E A	N	on-
AGE P	ERIOI	os	M.	F.	M.	F.	M.	F.	M.	F.
0—			 _	_	_	_	_	_	_	
1—			 _	_	_	_	_	_	_	_
2—			 _	_	_	_	_	_	_	
5—			 _	_	_	_	_	_	—	_
10—			 _	_	_	_	_	— `	_	_
15—	• • •		 2	_					_	_
20			 _	_	_	_	_		_	_
25—			 _	1	_	_	_	_	_	_
35—			 1	_	_	_	_	_	_	_
45—			 _	_	_	_	_	1	_	_
55—			 _	_	_	_	_	_	_	_
65—			 2	_	_	1	1	_	_	_
75—	•••		 _	1	_	_	_	_	_	_
Totals			 4	2	-	1	1	1	_	_

An account of Preventive and After-Care work is given under Prevention of Illness, Care and After-Care, later in the report.

VENEREAL DISEASE

The following table gives the numbers who, resident in Chester, attended the V.D. Clinic for the first time:—

Syphilis Gonorrhoea Other Conditions	 	1964 2 33 120	1965 2 23 75	1966 5 48 111	1967 2 30 83
		155	100	164	115

The following article, written by Dr. Jane Vosper in the magazine 'Good Housekeeping', puts very clearly the risks which people run, when they contract venereal disease, and suggests one reason for the rise in the V.D. rate, which is a matter of so serious concern.

'The venereal diseases are those transmitted during sexual intimacy with an infected person. Officially there are three—syphilis, gonorrhoea and soft chancre or chancroid. But there are also other less serious conditions, often innocently acquired in the first place, that may be passed to the sexual partner and should be included: non-syphilitic urethritis, scabies, crab lice, and trichomonas and thrush infections.

Untreated syphilis can do insidious and serious harm over the years to various parts of the body, ultimately damaging the brain to cause General Paralysis of the Insane, if it has not killed before by affecting the heart or blood vessels. It starts as a painless sore on the genitals or lip or, more rarely, on other parts, appearing about three to four weeks after exposure to infection. The lymph glands in the neighbourhood may also be enlarged. Unfortunately, these early symptoms may not be sufficiently troublesome to make the patient seek medical aid. The sore eventually heals over, but the germs, called spirochaetes, spread all over the body causing a more severe general reaction with headache, sore and ulcerated throat, more enlarged lymph glands, a non-irritating rash, and sometimes soft warts. At this stage the germs are present in the urine and saliva, so the infection may be spread by kissing and the passing of cups from mouth to mouth. The symptoms eventually subside, but the infection remains, possibly quietly but nevertheless dangerously. Pregnant women may pass on the infection to their baby, who is born with signs of congenital syphilis and potential damage to eyes, ears and brain.

In the early stages, the diagnosis has to be made by examining the discharge from the sore, but after about eight weeks the blood and fluid in the spinal canal become positive to the Wassermann Test, and remain positive until the disease is cured. Penicillin has revolutionized the treatment, which must be concentrated and lengthy, avoiding alcohol meantime. Otherwise the infection persists even though there are no obvious symptoms.

Gonorrhoea is much more common than syphilis. The organism responsible is the gonococcus, which can penetrate the lining membrane of the vagina and urethra causing pain and discharge, usually more acute in men than women. After that, it may spread through the blood stream to affect other organs or cause acute arthritis in one or more joints. The interval between the contact and the appearance of the symptoms is only a few days. It is particularly unfortunate for a woman if they are not sufficiently acute to make her seek treatment; she remains infectious and the infection may spread to the Fallopian tubes, making her sterile. Babies born to her before that may have a gonoccocal eye infection, caught from the vagina during birth.

Diagnosis cannot be made on symptoms alone, because there are other causes for pain on urination and discharge, and depends upon an examination of the discharge. The course of penicillin treatment for the early stages is much shorter than that required for syphilis, but a sulpha-drug may also be necessary for any complications.

The third venereal disease, soft chancre, is much less common, probably because the painfulness of the sore and glands speedily drive the patient to seek treatment.

The germs for all these venereal diseases are extremely fragile and die within seconds outside the body, so it is very unlikely that they can be picked up except by intimate contact with an infected person.

Some people worry about public lavatory seats and cups in cafés but, unless they have been used by infectious people seconds before, there is no risk. If you are doubtful of a public lavatory seat you can always raise it first and manage without sitting down.

If anyone suspects that they might have picked up a venereal disease, the sensible thing is to see their own doctor immediately. He is probably unshockable, and will be able to provide the necessary treatment. But it is also possible to attend a special clinic where no introductory letter is necessary and where strict secrecy is observed. Addresses of the clinics and session times can be discovered by phoning anonymously the offices of the local Medical Officer of Health.

It goes without saying that the best protection against V.D. is to avoid promiscuous relationships. We owe it to our young people to tell them that alcohol increases sexual desire and reduces their sense of responsibility, and not just expect them to know. The sad thing—as I know from letters—is that girls who value their virginity, and whose self-respect makes them shy of casual sexual experiments, often feel that social pressures demand them to go against their natural inclinations. They may even feel that they are abnormal not to 'go with the crowd'. To them, let us emphasise that they are the normal ones, and that they can keep their self-respect without losing face. Remember, too, that the girls who seek pathetically for love are often the unstable ones who have had no love at home.'

Since this article was written, cases have been reported where, in spite of apparently successful medical treatment, the organisms of syphilis have been found to persist in the blood and cerebro-spinal fluid. The danger is obvious—can we be sure of curing Venereal Disease?

The V.D. Clinics are held at Chester Royal Infirmary as follows:—

Males—

Wednesdays, 5 p.m. to 7 p.m. Saturdays, 11 a.m. to 1 p.m.

Females-

Mondays, 4-30 p.m. to 7-30 p.m.

LABORATORY SERVICES

The M.R.C. Public Health Laboratory in the precincts of the City Hospital with the facilities at the Royal Infirmary and City Hospital continue their excellent service and co-operation.

A Public Health Department may make a sudden demand on the services of the Laboratory almost without warning. We have been very well served indeed by the Laboratories on the occasions when outbreaks have made such demands inevitable.

SERVICES PROVIDED UNDER NATIONAL HEALTH SERVICE ACTS

1. HEALTH CENTRES (Section 21)

The opening of a new St. Martin's House in the latter half of 1967, was the result of co-operation between the Health Authorities of Cheshire County Council and of the City Council. The new building accommodates all the City Health Services (including School Health), and South-West Division of Cheshire and the County Dental Officer's Suite, besides a large general purpose clinic (shared by the two Authorities) and various specialist services of the County (Child Guidance, Teacher of the Deaf, and Special Clinics).

As regards Health Centres proper, under the N.H.S. Acts, consultations were held between the City Health Department and the Chester Local Medical Committee, and Chester Executive Council. No definite plans for the future were made.

2. CARE OF MOTHERS AND YOUNG CHILDREN (Section 27)

(i) Expectant Mothers

Antenatal Clinics are held at the City Hospital, Monday to Friday, each week. Many General Practitioners also hold weekly Antenatal Clinics in their surgeries and which may be attended by Midwives. Patients who are to be confined in their own homes are visited by the Midwives employed by the City Council, or they may attend the Midwives Clinic at Blacon (which commenced in 1964 and is open every Monday afternoon) or at the Central Clinic (which commenced in October, 1965), and is now open on Wednesday afternoons at St. Martin's House. The purpose of these Midwives Clinics is to speed up the Midwives' work, to give better Health Education and to provide a means of intercommunication between the Midwives, their pupils and their patients. No Doctors attend these Clinics, and it has not yet been possible to engage the services of a Physiotherapist.

(ii) Infant Welfare Clinics

The following Infant Welfare Clinics were in operation at the end of 1966:—

Tuesdays:

Saltney—St. Mark's Church Hall, 2—4 p.m. Hoole—All Saints' Church Hall, 2—4 p.m.

Wednesdays:

Blacon—The Clinic, 10 a.m.—12 noon and 2—4 p.m. Boughton—Civil Defence Headquarters, 2—4 p.m.

Thursday:

St. Martin's House—2—4 p.m. Blacon—The Clinic, 2—4 p.m.

Fridays:

Hoole—All Saints' Church Hall, 2—4 p.m.

The Blacon Clinic was very well attended and a third session was commenced in January, 1966.

The increased attendances at these Infant Welfare Clinics are very welcome and prove that these Clinics—which are for advice and health education only—are fulfilling an important function.

The Development Plan (of the Health and Welfare Services) includes the building of Clinic premises in various parts of the City and will be modified as the need arises and as the population is rehoused from Clearance areas. The building of a Clinic at Boughton was deferred for national economy reasons. Vandals caused a great deal of damage (and expense) at the Blacon Clinic.

PRINCESS STREET INFANT WELFARE (CENTRE	
	(1966)	1967
(a) By children under one year of age	1478	1618
(b) By children between the ages of one and five years	457	416
Consultations with Medical Officer:—	157	710
	384	451
	159	119
(b) Children, one to five years	139	119
SALTNEY INFANT WELFARE CENT	RE	
	(1966)	1967
(a) By children under one year of age	1882	2330
(b) By children between the ages of one and five years	597	557
Consultations with Medical Officer:—	3,7	55,
(a) Children under one year	445	385
	159	123
(b) Children, one to five years	139	125
BLACON INFANT WELFARE CENTI	RE	
	(1966)	1967
(a) By children under one year of age	4090	4191
(b) By children between the ages of one and five years	2151	2372
- · · · · · · · · · · · · · · · · · · ·	2131	2312
Consultations with Medical Officer:—	1150	1107
(a) Children under one year	1152	1127
(b) Children, one to five years	716	442
HOOLE INFANT WELFARE CENTR	Œ	
	(1966)	1967
(a) By children under one year of age	2792	2894
(b) By children between the ages of one and five years	681	564
Consultations with Medical Officer:—	001	204
	740	785
(a) Children under one year	748 202	
(b) Children, one to five years	202	226
BOUGHTON INFANT WELFARE CEN	TRE	
	(1966)	1967
(a) By children under one year of age	1338	721
(b) By children between the ages of one and five years	538	292
	220	272
Consultations with Medical Officer:—	200	100
(a) Children under one year	266	180
(b) Children, one to five years	67	125

TOTAL ATTENDANCES

(a) By children under one year (b) By children between the ag	_	 one an	,	years	(1966) 11580 4424 —————————————————————————————————	1967 11754 4201 15955
Consultation (a) Children under one year (b) Children, one to five years	ns with 	Medic 	al Offic	er:— 	2895 1303 4198	2928 1035 3963

(iii) Premature Infants

There is a Premature Infant Unit at the City Hospital which caters for infants below $5\frac{1}{2}$ lbs. weight, so that few had to be nursed at home. The ambulances are specially wired to carry the Premature Baby Incubators which are kept at the City Hospital.

By arrangement with the Consultant Paediatrician, one Health Visitor attended the Premature Unit at the City Hospital. There were adequate follow-up arrangements for home treatment after discharge from the hospital and co-operation in this field has been excellent.

One Health Visitor still visits Special Units weekly.

The number of Premature Births during 1967 was:-

		Ü		Live Births	Still Births
Born in Hospital (Twelve died under				66	17
Born at Home				12	<u></u>
Children born 'at risk':-					
In Hospital (Malformations, 14			•••		240
At Home (Malformations, 9).	•••		•••		30

(iv) Supply of Dried Milks, etc. (Welfare Foods)

National Dried Milk, Welfare Foods and Nutrients were available to the public, at the Health Department, St. Martin's House, from the end of September, and the hours of opening are:

Monday to Friday: 9 a.m. to 5-30 p.m.

The Centre is closed on Saturdays, Sundays and Bank Holidays.

All Welfare Foods, as well as many special brands of proprietory foods, vitamins, nutrients and accessories, are sold in all Infant Welfare Clinics (between 2—4 p.m. on the days shown above) and this service is intended

for people attending the Clinic. Lack of space and storage makes it difficult to make such facilities available to all.

Necessitous cases where financial hardship occurs can be assisted by the free supply of baby foods to the parent on the certification of the Clinic Medical Officer.

(v) Dental Care

Dental Services for Expectant and Nursing Mothers and Children Under 5 Years

A. Attendances and Treatment		
	Children 04 (incl.)	Expectant and Nursing Mothers
Number of Visits for Treatment During Year	, , , , ,	
First Visit	125	54
Subsequent Visits	84	78
Total Visits	209	132
Number of Additional Courses of Treatment		
other than the First Course commenced		
during year		1
Treatment provided during year		
Number of Fillings	78	76
Teeth Filled	77	71
Teeth Extracted	161	83
General Anaesthetics given	84	17
Emergency Visits by Patients	82	21
Patients X-Rayed	***	1
Patients Treated by Scaling and/or Removal		
of Stains from the teeth (Prophylaxis)	8	11
Teeth Otherwise Conserved	7	
Teeth Root Filled	*****	
Inlays	_	
Crowns	_	_
during the year	71	17
daring me year	, -	
B. Prosthetics		
Patients Supplied with F.U. or F.L. (First		
Time)		2
Patients Supplied with Other Dentures		2 2 7
Number of Dentures Supplied	•••	7
C. Anaesthetics		
General Anaesthetics Administered by Dental		
Officers		101
D. Inspections		
Number of Patients given First Inspections		
during year	151	61

	Children 0—4 (incl.)	Expectant and Nursing Mothers
Number of Patients in 'A' and 'D' above who required Treatment	125	60
Number of Patients in 'B' and 'E' above who were offered Treatment	121	60
E. Sessions		
Number of Dental Officer Sessions (i.e. Equivalent Complete Half-Days) Devoted to Maternity and Child Welfare Patients		
For Treatment		90
For Health Education		_

(vi) Institutional Provision for Mothers and Children

The only Maternity Hospital Accommodation within the City is at the City Hospital. There are no Private Nursing Homes nor Maternity Homes. (There is some private accommodation in adjacent areas outside the City).

The City Hospital also has a department for Premature Infants, as well as Children's Wards.

(vii) Family Planning Act, 1967

After consultation with the Chester Branch of the Family Planning Association, the Authority made the following provisions under the National Health Service (Family Planning) Act, 1967:—

- (a) 'Medical Cases'. Reference is made to the General Medical Practitioner for advice and confirmation, and then the patient is sent to the Family Planning Association Clinic, the cost being borne by the Local Authority.
- (b) 'Social Cases'. In all cases the agreement of the patient's own Doctor has to be obtained and then the case referred to the Family Planning Association, cost being borne by the Local Health Authority.
- (c) 'Unmarried, over 16 years'. Advice only is given in exceptional circumstances.
- (d) 'Domiciliary Treatment' is only given in necessitous cases. No charges are made where the income is at Social Security (the former National Assistance) level: Above this, the full cost has to be met by the patient where this is provided for by the Act.

The Local Health Authority made a grant of money towards the cost incurred in alterations to the Family Planning Clinic.

Twelve cases were referred for treatment, ten on medical and two on social grounds.

UNMARRIED MOTHERS AND THEIR INFANTS

The Authority gives financial assistance where this is necessary to unmarried mothers for six weeks before and six weeks after confinement. This period may be prolonged on application and especially in the case of young girls. The Chester and District Moral Welfare Association greatly assist us by investigating cases and finding accommodation in suitable

Mother and Baby Homes. Many cases assisted in this way are not referred for financial assistance, but where this is so, assessment is made of the need for help. The Local Health Authority expects the putative father to take his share of the financial responsibility.

Ten cases were helped during the year.

It is a difficult matter to find suitable Mother and Baby Homes for these girls and a knowledge of their home background and upbringing has to be matched to the type of Home to which they are sent. An annual grant is now made to the Moral Welfare Association for their part in investigating cases, interviewing putative fathers and conveying the mother to and from the Home. Without its assistance much more work would fall on the Health Visiting Staff.

NURSING HOMES

One Private Nursing Home, with accommodation for ten patients was registered under the Public Health Act, 1936, but this closed in December.

NURSERY AND CHILD MINDERS (REGULATION) ACT, 1948

The groups operating at the end of the year were fifteen in number and catered for a total of 193 children, which compares with seven groups for 116 children in 1966.

The Nursery groups are privately run and are open during weekdays, mornings only.

Each Nursery Group is inspected annually or more frequently if occasion demands, with a view to keeping up a satisfactory standard of hygiene and accommodation.

As a guide to the Standard of Accommodation, the School Premises Regulations give some standards of space and toilet accommodation in Nursery Classes: There must also be adequate means of escape in case of fire, and ability to segregate a suspected case of infectious disease.

3. MIDWIFERY (Section 23)

The Local Health Authority Services

The Council employs seven Full-Time and one Part-Time Midwife for Domiciliary work under the supervision of a non medical Supervisor, viz. the Principal Nursing Officer (who is also responsible for the work of Health Visitor/School Nurses, Clinic Nurses, and District Nurses). The Midwives travel by their own cars (so that they can have immediately on hand the Trilene or Gas Air apparatus).

The staff of seven full-time and one part-time Midwives was generally sufficient and there was no shortage of Midwives in the City.

Five City Midwives are now approved by the Central Midwives Board to undertake the teaching of pupils. In all, 14 pupils were trained during the year.

The City Hospital was approved for the Part II Training of pupil Midwives and arrangements were made for their District Training with

certain other lectures and demonstrations to commence in December (two City and two County pupils commenced training as lecturers, 1-12-67).

Hospital Accommodation

There is no Private Maternity accommodation in the City outside the City Hospital. The shortage of Hospital Accommodation throughout the country has led to shorter time being spent in Hospital after confinement and there was therefore a bigger turnover. At the present time, there is a priority scheme for hospital confinement, but many first babies have to be born at home. Nevertheless, excellent liaison between the City Hospital and the Local Authority has always made hospital confinement possible where home circumstances were unsuitable.

The Mother and Baby Home cases have to be confined in Hospital, because of lack of other accommodation, and this has given rise to some feeling of resentment when married women have to have their confinements in their own homes against their will.

Case Load

There were 318 confinements at home, but 56 other cases were admitted to hospital for delivery because of some obstetric abnormality. There were also 78 cases discharged from hospital within 48 hours of delivery, and 585 were discharged between the second and tenth day after confinement.

The number of early discharges were as follows:—

1961	608	1965	693
1962	660	1966	692
1963	717	1967	663
1964	758		

City Hospital	Antenatal Clinic	Postnatal Clinic
No. of City Patients	1060 (1047 in 1966)	391 (351 in 1966)
No. of Attendances	4678 (4461 in 1966)	427 (405 in 1966)

Home Confinement

Patients are urged to consult their own doctors early in pregnancy and then, with the pregnancy confirmed, immediately to get in touch with the Midwife or Principal Nursing Officer.

Three hundred and eighteen confinements were attended by the Municipal Midwives.

	Sta	tistics			(1966)	1967
No. of Cases attended as Midwi	ives				306	318
No. of antenatal visits		• • •			4656	4048
No. of daily nursing visits	• • •	•••			4336	4591
No. of cases receiving:—						
(a) Trilene:—						
Doctor present	•••	•••		• • •	43	30
Doctor not present		•••		• • •	217	233
(b) Gas and air (or oxygen)	• • •		• • •	• • •	_	-
(c) Pethidine:—						
Doctor present	• • •	•••		• • •	34	32
Doctor not present	•••	•••	• • •	• • •	191	205
(d) General anaesthetic	• • •	• • •	•••	• • •	_	3
Doctor called in by Midwives	•••	•••			81	83
Not	tificat	ion of B	irths		(1966)	1967
Total number of births notified	l			• • •	2317	2290
Cases delivered in Hospital (all	l area	s)	• • •		1946	1970
City cases delivered in Hospital	l				775	745
Domiciliary Confinements					309	318
No. of Still Births—Hospital (al	ll area	ıs)			48	55
No. of Still Births—Hospital (C	ity ca	ses)			16	23
No. of Still Births—At Home (C	City)	.,.			3	_
In the 318 cases confined at	home	, medic	al aid v	vas req	uired in 83	3 cases
(see table) for the following rea				Î		
Complications of Pregnancy					(1966)	1967 5
Toxaemia	•••	•••	•••	•••	3	8
	• • •	•••	•••	•••		
Ante-partum haemorrhage	•••	•••	•••	• • •	6	3
Intra-partum haemorrhage	•••	•••	•••	•••	4	2 5
Post-partum haemorrhage	•••	•••	•••	•••	3	
Complications of labour	•••	•••	• • •	• • •	29	19
Perineal tear	•••	•••	•••	•••	17	15
Complications of puerperium	•••	•••	• • •	• • •	2	3
Prematurity	• • •	•••			5	6
Other abnormalities and neona		mplicat	ions	•••	8	14
Ophthalmic Conditions	•••	•••	•••	•••	1	3
Stillbirth	•••			•••		
			Tot	al	81	83

Ophthalmia Neonatorum

No cases were notified.

Antenatal Care

As a result of discussions which took place between representatives of the General Medical Practitioners and of the Health Committee, agreement was reached on the opening of a Midwives Clinic at Blacon. The purpose of such a Clinic is to provide better examination facilities for the Midwives than are often found at home, to enable professional discussions to be made with a resultant higher standard of Ante and Postnatal Care, and to make the teaching of the Hygiene of Pregnancy a more positive subject for the patients. Relaxation classes would also be possible when a Physiotherapist was employed, and Health Education generally would be put on a more systematic basis.

The first Midwives Clinic was opened at Blacon Clinic in October, 1964. This proved successful and a second Midwives Clinic was commenced at the Central Clinic, Princess Street, in October, 1965, and subsequently transferred to St. Martin's House.

4. HEALTH VISITING

The staff of eight Health Visitors/School Nurses, under the Principal Nursing Officer, divide their work between Health and School Health Services. In their Clinic duties, they are assisted by two full-time Clinic Nurses, and these duties include:—

Health Education.

Infant Welfare Clinics.

Minor Ailments (Schoolchildren).

School Hygiene (Schoolchildren).

School Medical Inspections (with the School Medical Officer).

Immunisation (Diphtheria, Pertussis and Smallpox, B.C.G. and Poliomyelitis and Anti-Tetanus).

Tuberculosis Clinic.

Premature Baby Unit (City Hospital).

In addition, visits were made to homes for the following:—

Maternity and Child Welfare.

Problem Families.

Tuberculosis and Housing.

Infectious and Venereal Diseases.

Special Surveys (Cancer Research, Leukaemia, Peri-Natal Mortality, Encephalitis Survey, Natural Child Development Study).

Follow-up after Hospital Treatment.

Special Campaigns (Smoking and Lung Cancer, Phenylketonuria and Mental Deficiency, Accidents in the Home, Infants at Risk, etc.).

Attachment of Health Visitors to General Medical Practitioners

Preliminary arrangements were made towards full attachment of Health Visitors to Doctors in General Practice under the National Health Service. Most of the Doctors were visited and plans made for each practice to be

visited weekly by the same Health Visitor who dealt with problems arising. These arrangements were well received by the Doctors who pressed for full attachment.

Unfortunately, staff shortage, especially towards the latter part of the year, prevented this and, in fact, the shortages interfered even with the pilot scheme in being.

The ideal of full attachment is welcomed by the Doctors and will be implemented as soon as staffing permits.

The following visits were pa	iid by	y Health	Visito	rs:		
•					(1966)	1967
Primary Birth Visits		•••	•••		1077	1072
Subsequent Visits to Infants		•••		•••	6306	6584
Visits to Pre-School Children	ı	•••			3280	4296
Visits to Expectant Mothers			•••		89	99
Other Visits			•••		2208	1486
Cases of Tuberculosis (Visits)			• • •		1118	831
Phenylketonuria Tests		• • •			_	1012

Travelling

Four Health Visitors have car allowances: the others travel by public transport and have fares refunded.

Health Education

The Authority gives financial support to the Central Council for Health Education as well as to the Merseyside Cancer Education Committee. Pamphlets and posters are made available to the Health Visitors (and Midwives and District Nurses).

An Assistant Principal Nursing Officer was appointed, part of whose duties were to take over the programme of Health Education from the Health Visitor who formerly did it (but whose other duties became too onerous). The Assistant was sent on a Refresher Course (1968) to complete her background training.

Towards the end of 1967, shortage of staff occurred and it was not possible to continue any formulated programme of Health Education—the Health Visitors were fully extended in their other routine essential duties. Even the programme of attachment of Health Visitors to Doctors had to be modified for a time.

5. HOME NURSING SERVICE (Section 25)

The staff consisted of eight full-time Nurses and four part-time under the Principal Nursing Officer.

Seven mini-vans and car-allowances are provided. The following table categorises the cases visited, the districts and the work done.

DISTRICT NURSING, 1967

		Medical	Surgical	Injections	T.B.	Maternity	Infectious Diseases, Others	Over 65	Under 5	Over 24 Visits	Totals
BLACON	Cases	50		53	m	7	1	56	14	50	186
Vi	Visits	1405		1451	28	36	-	1689	80	2845	4039
BOUGHTON	Cases	27		37	_	ļ		71	7	41	66
Vi		937		1653	74	1	20	2804	17	3717	4205
CENTRAL	Cases	20		35	I	7	I	84	7	51	115
		2330		1554	ı	4	1	3627	S	3944	4734
GARDEN LANE Ca		4		34	-	I	ı	69		27	102
		1768		263	187	I	I	2124	ļ	2266	2674
HANDBRIDGE Ca		39		41	_		-	79	7	38	106
Vi		1267		1850	95	9	14	2812	ς	3081	3845
HOOLE	Cases	29		36	_	1	_	91	m	38	151
Vi		1647		1228	37	1	4	2516	98	3122	3860
NEWTON		54		33	l	1	1	9/	7	23	129
		1014		984	1	ì	Ī	2162	m	1946	2884
SALTNEY I Ca		57		29	7	_	I	9/	15	4	157
		1344		1297	119	10	1	3173	178	3732	4799
SALTNEY II Ca	Cases	25		14	I	I	1	31	1	∞	4
		661		969	1	1	I	959	ļ	838	1271
TOTALS	Cases	415		312	6	11		633	5	322	1085
		13058	7712	10856	570	99	39	21563	374	25491	32311
The total number of Cases and Visits in 196 33,994 respectively. Number of cases on books, 1-1-67, carried over Number of new cases Number of cases on books at 31-12-67	1.9	were 1,042 6 from 1966	and 263 8822 288	Of The The Water of The Water o	Of the 1,085 and, of the to The average in The average in The average in The average was 204 patients, totalling	Of the 1,085 cases attended, 633 (58%) were aged 65 of and, of the total visits (32,311), 21,563 (66%) were paid to The average number of nurses employed full-time was. The average number of nurses employed part-time was. The average number of hours worked by each daily was. The average number of hours worked by each, per week was totalling.	cases attended, tal visits (32,311) umber of nurses umber of hours v number of hours on discharge fr	1, 633 (58%) were aged 1), 21,563 (66%) were pieces proposed full-time was exployed part-time was sworked by each daily warrs worked by each, per from hospital, received	%) were aged (66%) were part of tall-time was reach daily warby each, per ital, received	d t d t	or over 8 8 4 7 7 7 7 7 42 tits 3912

The Service, which is free of charge to the patients, is given wherever the patient's Doctor advises it. A night rota is also maintained for emergency calls. The majority of the Home Nurses have had special District Training under the Queen's Institute.

During the year the Marie Curie Foundation employed Home Nurses under the control and guidance of the Home Nursing Service. These nurses, specially recruited, were able to give much lengthier periods of attention to patients at home than is possible under the Home Nursing Service.

Nursing equipment is available on hire, the item becoming the property of the patient when the total cost has been contributed.

The gifts of a wheeled chair and ripple bed were gratefully acknowledged.

Provision of Incontinence Pads to the elderly has practically dispensed with the necessity of the original Laundry Service.

6. VACCINATION AND IMMUNISATION (Section 26)

The following immunisations are now available, and the Local Health Authority is the source for the distribution to General Medical Practitioners and Hospitals in its area. (Arrangements have been made for the storage in Deep Freeze where necessary or in Refrigerators, of an adequate quantity of vaccines so that they are always and immediately available). The vaccines are available to Doctors on request at the Health Department:—

- (1) Vaccination against Smallpox
- (2) Vaccination against Poliomyelitis
- (3) Immunisation against Diphtheria
- (4) Immunisation against Whooping Cough
- (5) Immunisation against Tetanus
- (6) B.C.G. Vaccination against Tuberculosis

(1) Vaccination against Smallpox

Arrangements are now in force whereby a mother bringing her baby to the Infant Welfare Clinic can have him (her) vaccinated immediately, as the vaccine is always available.

It is now considered better to have babies vaccinated for the first time after their first birthday. This gives time for immunisation against other diseases more native to this country (and therefore more likely to affect the unvaccinated). After vaccination in the second year of life, it is recommended that re-vaccination be done during school life.

In the field of Vaccination and Immunisation, the importance of Health Education cannot be too strongly stressed. It is only by constantly putting before parents the risks and dangers of the unvaccinated (unimmunised) state that we shall keep away from the ever present danger of epidemic.

28

DIPHTHERIA IMMUNISATION

Age in Years 31st Dec, of the corres- ponding year.	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	Total inocu- lated 1953-1967
0	109	39	43	89	89	157	189	241	193	146	266	219	275	646	664	Age under 1 year 664
1	215	329	284	458	345	248	406	480	461	335	409	382	428	67	57	
2	32	101	97	114	118	70	106	104	94	64	23	57	66	21	68	Age 1—4 years 2542
3	19	50	29	58	66	62	56	66	60	32	27	46	44	19	9	2012
4	20	36	28	51	20	58	45	40	41	35	20	19	35	21	19	
5	76	88	30	104	59	129	109	27	85	159	76	18	49	54	29	
6	78	53	17	221	100	48	101	77	123	81	41	72	101	23	32	
7	21	16	11	92	39	4	30	29	42	39	15	21	7	4	11	Age 5-9 yrs
8	2	6	3	22	9	6	8	7	16	7	6	3	6	3	2	4181
9	1	3	1	7	7	8	3	6	11	1	2		3	•••	2	
10	•••	2	3	12	4	5	3	2	10	1	2		2	•••	2	
11	•••	2	9	19	15	9	21	22	23	48	44	46	15	8	5	
12	3	1	6	19	12	3	25	19	11	39	18	21	6	5	3	Age 10-14 yrs
13	•••	•••		•••	3		4	2	1	1	2	1	2		•••	4266
14	•••	•••		3	1	1	•••	1	2	•••						
15 and over	•••	•••	5	1	•••	•••	•		2	1		1	2	•••	1	Age 15 years and over 2246
Primary	576	726	566	1270	887	808	1106	1123	1175	989	951	906	1041	871	904	Total Primary 13899
Re-Inforcing	965	893	1044	1563	1090	1030	1084	1111	1365	1216	1219	1108	1701	1300	1521	Total Re-inforcing 18210
Total each Year	1541	1619	1610	2833	1977	1838	2190	2234	2540	2205	2170	2014	2742	2171	2425	GRAND TOTAL 32109

Health Education in the Clinics, in the Schools and even in the home is of vital importance and must be carried out properly if we are to fulfil our true function of preventing illness. It is hoped that the improvement, true function of preventing illness.

The figures of the percentage of children vaccinated and immunised do not give us cause for complacency, and it is obvious that a fuller programme of Health Education is urgently necessary.

Ages		Number Vaccinate		Number Re-Vaccinated		
	(1965)	(1966)	1967	(1965)	(1966)	1967
Under one year	10	63	13	_	_	
One year	209	254	210		_	1
2—4 years	184	133	166	2	3	7
5—15 years	36	67	37	19	44	40
Over 15 years	32	50	22	119	277	101
Totals	470	567	448	140	324	149

(2) Immunisation against Diphtheria

Parents are given the option of having this done by their own General Medical Practitioner or of attending the Clinics. Children of pre-school age are immunised at the Infant Welfare Clinics (q.v.), and school children receive their injections and reinforcing doses at the end of the School Medical Inspections.

Records of these and other immunisations are kept in the Department and are transferred on change of address.

The table over shows the number of children immunised against Diphtheria during the past 15 years.

(3) Immunisation against Whooping Cough

This is available on request from the patient's own Doctor or at the Infant Welfare Clinics, and is usually—though not necessarily—given in conjunction with Diphtheria immunisation. Three injections are necessary.

The following table shows numbers who have completed a primary course of Whooping Cough vaccine (singly or in combination), during the year:—

Age at Date of Final Injection

`	,	Others	
0—4 years	5—9 years	under 16 years	Total
740	42	5	787

(4) B.C.G. Vaccination against Tuberculosis

Since 1961, B.C.G. Vaccination has been available to all pupils of 13 years and upwards, and also, where necessary, to those over ten years old.

All Mantoux Positive cases were offered follow-up facilities. By co-operation with the Chest Physicians, these cases were examined and X-Rayed at the Chester Clinic to ascertain the cause of the enhanced reaction. These cases were kept under observation, when necessary, at the Chest Clinic.

The use of freeze-dried vaccine made the supply of B.C.G. Vaccine much easier (as it became unnecessary to order the vaccine several weeks in advance).

No. of Children, Young Persons and Students tested	 628
No. of these Mantoux Positive	 11
No. of these Mantoux Negative and given B.C.G. Vaccination	 614
No. absent for reading	 3

(5) Anti-Tetanus Immunisation

The combination of a vaccine against Diphtheria, Whooping Cough and Tetanus (lock jaw) has proved beneficial and, in spite of the relatively few cases of Tetanus the use of this 'triple Antigen' has a vogue.

Certainly in no disease more than in Tetanus is prevention better than cure—especially as the cure of established Tetanus is extremely chancy.

The Triple Antigen is available to Doctors in the City on request or may be given at the Infant Welfare Clinics. The purpose of the combination is to avoid injections over and above those already necessary for protection against Diphtheria and Whooping Cough.

Arrangements were put into force with the Casualty Department of the Royal Infirmary whereby all city patients receiving Anti-Tetanic Serum were notified to the Health Department, and were told of the necessity to be immunised against Tetanus. A Clinic was started and the patients invited to attend for active Immunisation (as contrasted to the passive immunity received on the injection of A.T.S. at Hospital). The reason for this necessity is the danger of Anaphylaxis occurring on second injections once A.T.S. has been given. By being actively immunised, the necessity for A.T.S. does not arise, and therefore there is no risk of incurring Anaphylaxis. The active immunity against Tetanus must, of course, be kept up to strength by occasional injections.

During the year three patients were given such injections.

(6) Poliomyelitis Vaccination

The fortunate absence of outbreaks of Poliomyelitis is reflected in the steady decline in the numbers applying for vaccination. This is still available to infants, children, expectant mothers and adults up to 40 years of age, but it is regrettable that public reaction is apparently stimulated only when cases of Poliomyelitis are reported.

In practice, the oral vaccine has virtually replaced the Salk, injected vaccine, which is now very rarely requested.

The table shows numbers of doses administered during the year and totals:—

	(1967)		(Totals)
Third dose	853		24487
Second dose	880		11254
First dose	902		11583
Fourth dose, Children, five to 12			
years	159	•••••••	8173
Fourth dose, other	96	• • • • • • • • • • • • • • • • • • • •	4844
	2890		60341

The Ministry now requires the keeping of Vaccination and Immunisation records only in respect of children under the age of 16, who have completed a Primary Course or received a Reinforcing dose of vaccine.

Notifications of and deaths from Poliomyelitis during the past years were as follows:—

	No. of	No. of Non-Paralyti	c	
Year	Cases	Cases	Total	Deaths
1960	 1	2	3	_
1961	 3	_	3	1
1962	 _	_	_	1
1963	 			
1964	 _	1	1	_
1965	 	1	1	_
1966	 		_	
1967	 _	_	_	_

Yellow Fever

Immunisation facilities are available in Liverpool and Manchester at the respective Health Departments.

7. AMBULANCE SERVICE (Section 27)

The existing agreement with the adjacent counties is that the City will provide a service for a radius of 4 miles from Chester in the County of Flintshire, and fifteen miles in Cheshire. This arrangement with Cheshire is becoming obsolete because of the development of the County Services.

We had under consideration various methods of co-operation with the County Services. Mutual aid continues at a very satisfactory level.

The mileages run for other Authorities were:—

Year	Miles
1958	19,726
1959	15,223
1960	7,873
1961	5,737
1962	6,446
1963	4,939
1964	4,484
1965	4,501
1966	2,228
1967	5,348

Emergency Conveyance of Patients by Air

Use was made of these arrangements on one occasion only when a man, badly injured in a car crash, was dying from renal failure because of his injuries. A helicopter from Valley, Anglesey, was requested and the patient was taken up at the Roodee in Chester and conveyed to Manchester Royal Infirmary, where, after some weeks of treatment he made a good recovery. The journey cost the Local Authority about £160—a small price to pay for saving a life.

Our congratulations go to the Doctors in Chester who, through their vigilance, forsaw and diagnosed the danger; the Doctors and Nursing Staff in Manchester who used their skill to such good effect, as well as to the Nurses and Ambulance Staff who successfully completed this delicate mission.

I appreciate the great help given by the Hospital Management Committee in making the necessary arrangements.

Staff

The Ambulance Staff remained at one Ambulance Officer, one Deputy, a Clerk-Telephonist and eighteen Driver/Attendants. Overtime of two hours per week brought the minimum number of hours worked by each driver up to 42, but considerable overtime was necessitated to cover the gradually increasing work of the section.

Ambulance Training

As it was not possible to send staff away on Training Courses, the Drivers were required to undergo First-Aid Courses each year, though the certificates issued by the First Aid Associations were valid for three years.

Vehicles

The City Service comprises four ambulances and three sitting case vehicles, the latter being convertable to carry stretcher cases.

All the vehicles are equipped with the latest Transistorised Radio-Telephones so that they can communicate with the Ambulance Depot from anywhere within the Chester area and surroundings.

There is no direct communication between ambulances and the Casualty Department of the Royal Infirmary. Consideration is being given to a direct telephone link between the Ambulance Depot and the Hospitals.

Petrol Supplies

Petrol Supplies are drawn from a Central Corporation Depot: local facilities have been arranged for emergency supplies at night, week-ends or other occasions when the Depot is closed.

Details in relation to mileage run and patients carried are as follows:—

Year	Total Miles	Total Number of Patients Carried
1960	 87,250	 21,403
1961	 90,327	 21,041
1962	 96,162	 22,157
1963	 105,232	 25,459
1964	 107,934	 27,857
1965	 110,452	 28,194
1966	 107,936	 25,026
1967	 108,325	 24,711

The increasing development of the contiguous services and alternative arrangements for the conveyance of Dee Banks pupils probably account for the reductions shown.

Rail Cases

Arrangements were made for transport by rail of 27 patients as follows:

	Journeys	Patients	Mileage
Voucher supplied	7	7	1259
Voucher not supplied	20	20	1781
	27	27	3040

Flying Squad Cases

1964	 7 with Police escort	 Total	32
1965	 11 with Police escort	 Total	40
1966	 13 with Police escort	 Total	64
1967	 14 with Police escort	 Total	105

Emergency Services

In addition to the many routine duties performed by the Service (admissions to hospital, discharges, inter-hospital transfers, day psychiatric cases, welfare (reception) classes, conveyance of subnormals to Dee Banks, etc.), the ambulances are on call for the Emergency Midwifery Team to attend domiciliary confinements over a large area, and an Emergency Surgical Team.

The steady and remarkable increase in road traffic over the last few years and the fact that the two main General Hospitals are in the City, are reflected in the high number of journeys, mileage and patients carried, which are recorded in the following table.

1968
March,
31st
ended
Year
SERVICE—
<u> </u>
SER
CANCE

NOTE: A .- Ambulance; S .- Sitting Case Vehicle; T.C .- Training Centre; Wel. -- Welfare.

Column 2 includes Columns 3 and 4; Columns 8 and 11 include 12-16; Columns 18 and 19 include 20 and 21.

8. PREVENTION OF ILLNESS, CARE AND AFTER-CARE (Section 28)

(i) Tuberculosis

Close liaison between the Chest Clinic and the Health Department is maintained. One Health Visitor is appointed to attend at the Clinic and to visit tuberculosis patients in their homes.

Again I wish to thank the Doctors and Staff of the Chest Clinic for their great help during the year. Preventive Tuberculosis work has been enhanced and has assumed a more concrete and purposeful form. It was easier to assess the relative needs for rehousing of tuberculosis families and much greater activity in this field was possible.

Number of visits to patien	nts by	Health	Visitin	g Staff			823							
No. of patients assisted in	T.B. C	Colonies	s	•••	•••	•••	1							
Contact Scheme (City residents attending Chest Clinic):														
No. Skin Tested							16							
No. found Positive		:					_							
No. found Negative							16							
No. Vaccinated							16							
No. of New Contacts ex-	amine	d b					30							
No. of these found to ha	ve Tu	berculo	sis				_							
No. of Infants Vaccinate	ed						690							

Free Milk. The scales of application of the Free Milk Scheme were amended to conform to National Assistance Standards. Each individual case is visited by the Tuberculosis Visitor and referred to the Health Service Sub-Committee.

In some cases the supply of free milk was augmented by the issue of free eggs.

Tuberculosis Colony

One Tuberculosis patient is maintained at the Sherwood Village Settlement, Nottingham.

Protection of Children against Tuberculosis

The B.C.G. Scheme for vaccination of school children and students which was started in 1955 was continued, vaccination being done in the schools during the Autumn Term (for statistics see Vaccination and Immunisation).

The contact scheme was maintained by the staff of the Chest Clinic at the City Hospital throughout the year (figures above).

The Ministry of Health Circular on this subject recommended the X-Ray every three years of all those whose work brought them into close contact with groups of children. Thus School Staff, Children's Homes, Nursery Groups, Private Schools and many other Corporation staff are affected. Use is made of the Mass Radiography Unit of the Regional Hospital Board.

Mass Radiography Unit

This unit visited Blacon with the following results:—

No. examined	Male 108 3	Female 283	Total 391
Tuberculosis Carcinoma	1		1
No pathology found	2	2	4

(ii) Blind Persons

The Chester Blind Welfare Society give the following data:—

Numbers on Register at Blind Partially Sighted	end of	year:—	M. 41 21	F. 73 20	TOTAL 114 41
			62	93	155

Four Blind persons were under the age of 16, and being educated in Special Schools. Nineteen were in the employable age groups 16—59, two of these were in the Workshop for the Blind, six employed under ordinary conditions and eleven others not available for work.

On the register of Partially Sighted—two were in Special Schools, one at a local school, five were employed and one available for employment.

A .- Follow up of Registered Blind and Partially Sighted Persons

	(Cause of Dis	ability Retrolental	
(i) No. of cases registered during year in respect of which Sec. F. of Form B.D.8 recommends:	Cataract	Glaucoma	Fibroplasia	Other
(a) No treatment:				
Blind	2	_	_	5
Partially Sighted (b) Treatment (Medical Surgical or Optical):	_	1	_	
Blind	2	3		9
Partially Sighted	3	_	_	6
(ii) Number of cases at (i) (b) above which on follow-up action have received treatment:				
Blind	1	3		8
Partially Sighted	1			6

B.—Ophthalmia Neonatorum

(i) Total number of cases notified during the year			0 -0 -0	
(ii) Number of cases in which:—				
a. Vision lost				
b. Vision impaired				Nil.
c. Treatment continuing at en	d of y	/ear		

(iii) Epileptics and Spastics

Epileptic and Spastic children of school age are dealt with under the Education Acts.

The Welfare Committee provides for the maintenance of two adult epileptics in colonies and two in special homes. Five adult spastics are on the register, two of whom attend a handicrafts class and are transported by the City Ambulances.

(iv) Illness Generally-Prevention and Care

Laundry Service

The provision of Incontinence Pads has now almost entirely dispensed with the necessity for the provision of the usual Laundry facilities. When necessary the pads are supplied, free of charge, to patients nursed at home.

Chiropody Service

This service was instituted in 1961 in order to provide for persons who were housebound and therefore unable to receive treatment through the Welfare Department. Despite increased costs in January, 1967, the patient's contribution was maintained at 2/6d. per treatment.

No. of Cases treated	150
No. of Treatments	760

Nursing Equipment on Loan or Hire

Nursing equipment, for use in the home, was available through the Home Nursing Service. It is now customary that when the total hire payments of an article equals its actual cost (say in long term illness), the article then becomes the property of the patient.

Special items, such as the Ripple Bed, designed to prevent pressure sores, were available by arrangement.

The number of articles on loan during the year was 527.

(v) Cervical Cytology Clinic

This commenced on 31st May, 1966, and was held at Blacon Clinic; sessions as and when necessary, and attendances by appointment.

	No. Examined	Positive	Negative
1966	243		243
1967	182	1	181

Specimens are obtained and examined at the R.H.B. Laboratory at the Royal Infirmary. Patients and their Doctors are notified of results by this Department.

Convalescence

The Local Authority in certain instances provides for convalescence of persons not normally eligible under the National Health Act.

9. HOME HELPS (Section 29)

The unremitting demands on the Service continued throughout the year, when in an endeavour to cover the increasing work, the establishment was further expanded and at the end of the year consisted of the Organiser with 33 full-time, 12 part-time and three temporary part-time Helps.

Five additional full-time staff were appointed in January, 1967, bringing the establishment of Helps up to 33 full-time and 12 part-time.

In addition, three temporary part-time staff were appointed in June, 1967.

Since five additional full-time Home Helps were appointed in January, 1967, the number of hours help given to the aged has improved slightly. With three additional temporary part-time staff appointed in June to help out during absences, i.e. sick or on leave, there are still a few households left without help during the peak summer holiday period—July/August. However, as some of the aged prefer to manage thus during the absence of their usual Home Help for 1—2 weeks, the actual number of households without help is greatly reduced.

The following table details the work for the year:—

Ü	ħ	No. of Ca	ses	Ho	ed	
Type of Case	1965	1966	1967	1965	1966	1967
(a) Maternity	39	40	19	1065	1017	1137
(b) Tuberculosis	_	_		_		_
(c) Aged, Infirm and Chronic Sick	285	326	369	39026	50070	59589
(d) Mental Illness and Mental deficiency	12	10	8	833	631	851
(e) Other	46	21	32	1811	2585	1139
	382	397	425	42735	54303	62716

335 out of 425 cases were over 65 years of age (i.e. 79%) and they received 54,293 hours out of a total of 62,716 (i.e. 86%).

10. MENTAL HEALTH SERVICES

Staff

During the year there was a diminution of the service, due entirely to staffing difficulties.

For two months at the latter end of 1967, the Mental Health Department was manned solely by the Senior Mental Welfare Officer. This unavoidably led to a decrease in the number of visits made to Pre-Care and After-Care Mentally Ill patients, and to Mentally Subnormal cases.

In November, a Mental Welfare Officer was appointed and the return of a Mental Welfare Officer from the two-year Social Work Course at the Liverpool College of Commerce is expected in 1968.

Training Centres

Staffing difficulties were also experienced at Dee Banks School, but in May we obtained the services of a qualified Teacher of the Mentally Handicapped as Supervisor, plus the appointment of a qualified teacher, and qualified nursery assistant for the nursery class. All the other teaching staff were sent to Bristol University on a refresher course. In addition, the Principal Tutor at Manchester of the N.A.M.H. Course for Teachers of the Mentally Handicapped and her staff, visited the school weekly for a period of a month, giving their services voluntarily—a greatly appreciated act.

In the Adult Centre, one of the male staff was seconded to Birmingham on the N.A.M.H. one-year course. To cover his absence, another male instructor was employed. In December we lost the services of the Principal. Until a replacement was appointed, the Adult Centre was taken over by the Supervisor of the Junior School. To alleviate some of the burden on the staff, one of them, at her own request, was transferred from the Junior School to the Adult Centre. These difficulties obviously left a big burden on the remaining staff, both in the Junior School and Adult Centre, but thanks to their efforts a marked improvement is visible, and this is reflected in the happiness of the pupils and trainees.

During the year, Cheshire County Council provided accommodation for the Cheshire pupils in their own Centres. This allowed the waiting list of Chester and Flintshire cases to be cleared.

Physical Education Classes

Police Cadets from the Training Department of the Cheshire Constabulary at Crewe gave their services voluntarily each Thursday for the pupils' benefit. These classes were greatly appreciated by pupils, as well as by the parents and staff of the School, and by the Local Authority.

Transport

Transport is provided as necessary free of charge to pupils and trainees by a Motor Coach, Ambulance and the Departmental Mini-Bus.

Activities

Regular monthly meetings of the Parent-Teacher Association are held at the School. Interesting programmes and fund raising schemes are arranged, and the money raised is used for the benefit of the children.

As in the past, both the Parent-Teacher Association and the Chester Branch of the National Society for Mentally Handicapped Children have once again given most generously to the school, and their gifts are gratefully acknowledged. Gifts were also received from the Sealand Youth Club.

Youth Club

A Youth Club was commenced by the Principal and staff of the Adult Centre. The Club is open every Wednesday night and all trainees and friends are welcome. Many social activities, such as Dancing, Table Tennis, etc., are enjoyed.

Residential Accommodation

MENTALLY ILL

There were three City cases admitted to the Richmond Fellowship Home in Kilmorey Park, Chester, for periods of rehabilitation. It was necessary to extend the period in two cases beyond the usual six months. Patients contribute towards their upkeep here, if they are earning, but the major cost is borne by the Local Health Authority. Admissions and discharges are controlled by the Consultant Psychiatrists.

SUBNORMAL

I am pleased to report a substantial improvement in the accommodation for subnormal patients. During this year we were able to place nine cases into Permanent Care, and now only have one case on the waiting list for admission. One case was assisted in private accommodation by the Handicapped Children's Society.

SHORT TERM CARE

As in previous years, no difficulties were experienced in placing cases for short term care, but I would re-emphasise the importance of early application, if parents wish to avail themselves of this service, in order to allow the Hospitals adequate time to make the necessary arrangements.

GUARDIANSHIP

There were no cases under guardianship during 1967.

The following table gives details of duties performed by Mental Welfare Officers during the year:—

		Mentally	y III		ly) nal	
	M.	F.	Total	M.	F.	Total
Informal Admission	48	96	155	4	5	9
Emergency Admissions (Sec. 29 Mental Health Act	9	12	21			
		12	21			
'Observation'	0	16	24			
Admissions (Sec. 25)	8	16	24	_		
'Treatment' Admissions (Sec. 26)	1	1	2	-		_
Admissions through Courts, &c. (Sec. 60, 65 & 136)	1	_	1		_	_
Reclassification in Hospital						
(Sec. 25) v	3	3	6		_	_
Section 26	1	6	7	_		
No Action cases	1	3	4		_	
Total Number of Admissions	71	134	205	4	5	9
Pre-Care and After-Care Visits			2703			344

The Local Authority took part in the National Mental Health Week activities and Dee Banks was open to the public.

1967	Grand Total Cols. 1—16 (19)	415	49	I	I			1	2	ı	6		77	333	۱ ،	-		4	1	4	
-	bnormal 16 and over (18)	0	 -	1	I			I	I	1	1		ر	9	ı			¥~4	1	1	
DECEMBER	Total Subnormal & Severely Subnormal Under 16 and 16 over (17) (18)	00 1	2			1	ı	1	1	I	1		r	n n	l	1		I		1	
AT 31st	Severely Subnormal Under 16 and 16 over M. F. M. F.	4 E	3 2	1		1		 	1	1	 		-		 -	1 1		1 1	 	1 1	
CARE	Severely S Under 16 M. F. (13) (14)	44 39	12 11	1	1	 		1	1	1				23 21		1 1		1	1		
AUTHORITY	Subnormal nder 16 and F. M. F. (10) (11) (12)	11 7	11 7	1	1	1	 	 	1		1				1	1 1		_ 1	1 1	1	
AUTH	D ¥.€	کر م	1	1	1	1	l I	1	1	1	1			₂		1		1	 	1	
HEALTH	Psychopathic Index 16 and Over It. F. M. F. (8)	1	1		1	1] 		1		1				1	1 1		1			
LOCAL HI	L'D ZØ	11 44	1	1	1	1	1	1			2 3			, 11 41				1			
ER LOC	entally III ler 16 and over F. M. F. (2) (3) (4)	1 70 151	1	1	1		1	1			1 3 2			- 67 147					1 1		
CND	Men Under 16 M. F (1) (2	1	 	1	1	1	1 1 	 -		 	1		bn.	 			- d3	1			
OF PATIENTS		:	centre	:	:	:	Resident in L.A. nome/noster Awaiting residence in L.A. home/	hostel Resident at I. A expense in other	tel	sident at L.A. expense by boarding out in private house		Receiving home visits and not in- cluded in lines 2-10:—	(a) Suitable to attend training	::	No. of patients in L.H.A. area on iting list for admission to hospital 31-12-67:— In urgent need of hospital care	(b) Not in urgent need of hospital care (c) Total	2. No. of admissions for temporary residential care (e.g. to relieve the family during 1967:—		(b) To L.A. residential accommodation (c) Elsewhere		
OF PA		:	rtaining	y thereto	ne training	e training	.A. nome, dence in I	A Pynen	home/hos	L.A. e. It in priva	hospitals	ne visits a	ole to atte	ire	s in L.H. dmission of hospita	need of h	sions for (e.g. to	pitals	ntial acco		
NUMBER		Total number	Attending day training centre	Awaiting entry thereto	Receiving home training	Awaiting home training	Resident in L.A. nome/nostel Awaiting residence in L.A. ho	hostel	residential home/hostel	Resident at L.A. expense boarding out in private hous	Attending day hospitals	sceiving home visits an cluded in lines 210:-	(a) Suital	centre (b) Others	1. No. of patients in L.H.A. are waiting list for admission to ho at 31-12-67:— (a) In urgent need of hospital care	in urgent	2. No. of admissions residential care (e.g. family during 1967.	(a) To N.H.S. hospitals	A. reside		
Z		1. Tots	2. Atte			5. Awa	o. Kesi 7. Awa	hc 8 Reci		9. Resi	10. Atte	11. Rece			1. No. of payaging list at 31-12-67:-	(b) Not 1 (c) Total	2. No. residenti	(a) To N	(b) To L.A. re	(d) Total	

NUMBER OF PATIENTS REFERRED TO LOCAL HEALTH AUTHORITY DURING YEAR ENDED 31st DECEMBER, 1967

REFERRED BY	Ţ	Ment Juder 16	Mentally III Under 16 and 16 over		Psychopathic Under 16 and 16 over	hopa r 16	thic 6 and over	S Un	Subnor Under 16	over	Sev	erely Unde	Sub r 1	Subnormal Severely Subnormal Inder 16 and Under 16 and 16 over 16 over	Total Subnormal & Severely Subnormal Under 16 and	ormal & onormal 16 and	Grand Total Cols.
	₹ €		F. M. F. (2) (3) (4)	_	M. F. (5)			₹ €	F. 1 (10) (1	M. (11)	F. A. (1	F. M. F. M. F. [12] (13) (14) (15) (16	?. ₹ € (15	M. F. M. F. M. F. (11) (12) (13) (14) (15) (16)	16 (17)	over (18)	(19)
(a) General practitioners	 	1	41 101	- 10		. 2	3	1					T	1	1	١	147
(b) Hospitals, on discharge from inpatient treatment	급:		36 7	73			2	- 1	1					ı	ı	ı	118
(c) Hospitals, after or during outpatient or day treatment	<u>.</u> ;		6	- 1				J						ı	1	l	26
(d) Local education authorities	 		1		1	T		1	1		1	1		I	ļ	1	m
(e) Police and courts			10	7 -	1	-	1	1						ı	1	I	18
(f) Other sources	 - -	I	25	38 –		1		1	1					-	1	_	99
(g) Totals		1	1 121 236	36 -		9 -	6	1	-					1	1	1	378

NATIONAL ASSISTANCE ACT, 1948

No cases were compulsorily removed during the year.

FAMILY CASEWORKER

To cope with Problem Families in the City, a Family Caseworker was first appointed in 1964. As she worked single handed, her case load was heavy and a great deal of her time was taken up with liaison between officers in Children's Education, Health, Housing and Welfare Departments and the various voluntary bodies in the City, Probation Service and other important units.

One cannot expect remarkable results under such circumstances, but this appointment is a step towards the providing of family advice units which some large Authorities have.

Our activities in this field were interrupted with the resignation of the Family Caseworker and, at the time of writing, the vacancy had not been filled eight months later.

MEDICAL EXAMINATIONS

Medical Examinations for other Departments of the Corporation are made by the Assistant Medical Officers of Health, and at the time of writing, no charge is made on these Departments:—

(1) Residential Nurseries

The Medical Officers carried out routine examinations of the children on admission to the Children's Nurseries, on discharge and other special occasions.

(2) Superannuation Examinations

Staff of all Corporation Departments were examined by the Medical Officers for the purpose of determining their fitness for (a) Employment, (b) Entry into the various Sickness Pay Schemes, (c) Entry into the Corporation Superannuation Scheme.

In the case of Staff associated with school children, the examinations have included X-Ray of chest (usually done at the Mass Radiography Unit) and for teachers in the Education Department, full reports on Forms 4 R.T.C. and 28 R.Q. were made.

The number of examinations in the year was 547 and for comparison with previous years:—

1960: 352 1961: 331 1962: 456 1963: 395 1964: 438 1965: 523 1966: 560

(3) Examination of Transport Staff

It was decided that medical examinations for Public Service Vehicle Licences should be carried out by the Assistant Medical Officers of Health at the same time as they do the superannuation examinations, and that they should give the medical certificate without charge to the candidate

CREMATION REFEREES

On the opening of the City Crematorium at Blacon, in November, 1965, the Medical Officer of Health and Deputy undertook the duties of Cremation Referee and Deputy.

			1966	1967
Certificates completed	 	 	 1031	911

SEWERAGE AND SEWAGE DISPOSAL

Work is proceeding according to plan on the reconstruction of the Disposal Works at Sealand Road, the first and second stages having been completed and now in operation. The final stage, the completion of the mechanical aeration plant, which will produce a Royal Commission Standard effluent is expected in early 1968.

WATER SUPPLY

The supply which is drawn from the River Dee, is provided by the Chester Waterworks Company, and is examined every two weeks for bacterial contents, and every month chemically.

Bacteriological Sampling shows the usual contamination of the river, but the samples taken at the filters and in the town have always been first class.

Plumbo solvency has remained at a low level with the pH averaging 6.8.

The supply was examined on the following dates and found to be satisfactory:—

4th and 18th January.	13th and 26th July.
8th and 22nd February.	11th and 23rd August.
9th and 22nd March.	6th and 20th September.
12th and 26th April.	4th and 26th October.
10th, 11th, 19th, 24th and 25th May.	8th, 11th and 26th November.
7th and 21st June.	6th and 20th December.

The number of dwelling houses and number of population supplied from public mains was:—

	Supplied direct to Houses	By Standpipe
Houses supplied	20,745	3
Persons supplied	60,360	5

Fluoride Content and Fluoridation

A special analysis of the water showed a trace only of fluorides in the supply (about 0.1 parts per million).

No further consideration or amendment of policy by the Authority resulted and the question of added Fluoride remained deferred.

WATER

The City water supply is drawn from the River Dee and supplied by the Chester Waterworks Company. The water is filtered and chlorinated at the Company's works.

The standard of purity and adequacy of supply have been maintained during the year, the water being graded 'Class I'.

Bacteriological examinations of the water supply including water from various filter beds have been carried out twice a month. In addition, chemical analyses of water from a consumer's tap have been carried out by the Public Analyst every month. and the following table gives the result of these analyses, which are shown in parts per million of water.

CHEMICAL EXAMINATION OF CITY WATER SUPPLY

Parts per Million Total Solids	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Nitrogen as free and Saline	0.017	0.101	1/3.0	1/0.0	703.0	7.007	0.767	7.007	0.121	0.011	7	0.0
Ammonia	0.04	0.07	IIZ	0.05	0.09	0.04	0.02	Ë	0.00	0.03	0.08	0.08
Nitrogen as Albuminoid Ammonia	Z	0.05	ïZ	Z	0.02	0.02	0.01	Ž			0.03	0.03
Nitrogen as Nitrites	-1-1	ïZ	ïZ	Z	 		*	0	Z	-1-1		0.4
Nitrogen as Nitrates	0.5	1.5	1.5	2.5	0.5	6.0	10	1.6	0.5	٠ ۲۷	5	+ _
Chlorides as Cl	26.0	30.0	24.0	31.0	25.0	39.0	48.0	35.0	20.0	15.0	26.0	2.5 2.0 2.0 2.0
Oxygen absorbed from Permanga-) : 			2				2		2:1
nate in four hours at 27°C	0.4	0.7	6.0	1.0	1.4	1.0	0.6			0.7		-
Total Hardness	102.0	106.0	0.66	109.0	113.0	140.0	136.0			45.0		1.5
Temporary Hardness	0.09	0.89	52.0	64.0	62.0	66.0	50.0			20.0	56.0	52.0
Permanent Hardness	42.0	38.0	47.0	45.0	41.0	74.0	86.0			25.0		0.6
Alkalinity	0.09	0.89	52.0	64.0	62.0	0.99	50.0			20.0		52.0
Free Chlorine	0.03	0.15	Ë	0.1	0.12	0.02	0.03			Z		Ē
Poisonous Metals	ΞZ	Ē	ΞZ	Ξ̈́Z	ïZ	ïZ	Z			Z		Z
Potassium as K	2.3	2.6	2.6	2.5	3.2	3.1	4.3			1.0		1.8
Anionic Synthetic Detergents	Ξ̈	ïZ	Ë	ΞZ	Ξ	Ξ̈́	Ë			Z		Z
Cyanides and Thiocyanates	Z	ïZ	ΞZ	ΞZ	ïZ	ËZ	Z			Z		Z
Manganese as Mn	Ī	Ξ	ïZ	Z	Ξ̈́Z	Ξ̈́Z	Z			Z		Z
Phenols	Ξ̈́Z	Ξ	ΞZ	ïZ	Ξ̈́	ïZ	Z			Z		Z
Reaction, pH	6.1	7.05	7.0	7.3	6.7	7.4	7.3	7.4	7.0	6.65		7.3
6-Negative		race	F_Slig	f-Slight Trace		Hoir T.		* Mod	7 T	- 00		

Chief Public Health Inspector's Report 1967

INSPECTION OF AREA

ENVIRONMENTAL HY	GIEN!	E					
Complaints received—D	welling	gs					445
Complaints received—C	ther P	remises				•••	119
Visits in respect of Com	plaints-	—Dwel	llings		,		2719
Visits in respect of Cor							443
1 10 1	1				-=		
VISITS TO PREMISES	REGA	RDIN	G:				
				First		Inspections Sbsqnt.	Total
(a) Defects and Repairs		:		199		999	1198
(1-) (1-)				11		9	20
(-) 37				120		149	269
				17		36	53
() O.1 D				313		367	680
Houses in Proposed Cle				220		50,	000
(-) To on a stinue							138
41.04 37.1							549
Individual Unfit Houses	:—						
(a) Inspections							21
(h) Oshan Wiston							11
Houses in Multiple Occi	upation	:					
(a) Inspections						•••	46
(b) Other Visits						•••	68
Factories, visits		•••	• • •	• • •		•••	155
Offices, Shops and Railv	vay Pre	mises:-					
(a) Inspections			•••	• • •	• • •	•••	326
			•••	• • •	• • •	•••	42
(c) Investigations into					• • •	•••	31
Atmospheric Pollution,					ents	•••	149
Smoke Nuisances Visits					• • •		31
Noise Nuisances Visits				• • •			31
Animal Boarding Establ							4
Brooks and Streams, in	_			•••			20
Open Ground and Com							28
Pet Animal Shops, inspe							7
Destruction of Rats and	d Mice	, visits	• • •	•••			3846

Drainage Work:—						
(a) No. of Premises invo	lved					317
(b) Inspections						847
(c) Tests applied	•••					172
Premises disinfected after	infectious	disea	ises			4
Premises disinfested for ve	ermin	• • •	• • •	,		44
FOOD HYGIENE, ETC.						
Inspections of:—						
Bakehouses						6
Butchers' Shops and Meat	Depots		• • •			21
Cake Shops						5
Dairies and Milk Dealers'	Premises					59
Fishmongers						6
Food Vehicles		• • •				86
Fried Fish Shops						5
General Provision Shops						25
Greengrocers						9
Hotels and Guest Houses						33
Licensed Premises						165
Restaurants and Cafes						89
Sweets and Ice Cream Pre	mises					21
Other Food Premises	•••					74
Food Inspection Visits	•••		• • •			184
ADMINISTRATION:—						
Number of letters sent						1730
Public Health Act, 1936						
Number of Preliminary	Notices s	erved				42
Number of Statutory No						27
J						
	HOUS	ING				
Slum Clearance						
The following areas have 1967:—	been re	presen	ited and	d/or co	onfirme	d during
(a) Areas Represented but	not Confi	rmed			No. o	f Houses
Overleigh Road, No. 1						4
Bold Square						11
Handbridge						3 9

(b) Areas Represented and Confirm	ed				
Christleton Road, Nos. 1 and 2					40
Overleigh Road, No. 2	• • •				8
					48
(c) Areas Represented in 1965 and 1	1 966 an	ıd Confi	rmed in	n 1967	
Boughton	• • •				14
Curzon Street, Nos. 1 and 2					34
Bunce Street	• • •	•••			4
Abbots Meads, Nos. 1 and 2					8
St. James Street	• • •				92
Richmond Terrace, Nos. 1, 2 and	d 3		•••		26
					178

Individual Unfit Dwellings

Undertakings were accepted to close 15 privately owned individually unfit dwellings and a resolution made to close five dwellings owned by the Corporation. A demolition order was made in respect of one house.

Nineteen dwellings which were the subject of undertakings were vacated during the year.

Houses in Multiple Occupation

Fourteen houses in respect of which directions are in operation under Section 19 Housing Act, 1961, to limit the number of persons occupying the houses dependent upon the facilities provided were inspected regularly throughout the year. Two new directions were given.

The direction on one house was revoked following discontinuation of the use of the premises as a house in multiple occupation and directions on three houses were varied following installation of additional facilities.

A warning letter was issued by the Council in respect of one house in multiple occupation.

CLEAN AIR

During the year, four notifications and applications for prior approval for the alteration or installation of furnaces under Section 3 of the Clean Air Act, 1956, were received and approved by the Council. Two applications were for gas fired installations, and two for boilers fired by oil.

Four complaints of smoke emissions were investigated, three of which were dealt with satisfactorily and in the fourth case complaint was first received in December and works are in hand.

Eight complaints of offensive smells and fumes alleged to be from the Leadworks were received and were referred to H.M. Inspector Alkali, etc., Works.

During 1967, eighty-seven complaints were received mainly from residents in the Saltney, Curzon Park and Lache areas of offensive smells emanating from an Animal by-products Factory situated outside the City area as follows:—

Each complaint was forwarded to the Chief Public Health Inspector of the area in which the factory is situated and it is confirmed by that Authority, that further works designed to overcome the nuisance were completed on 16th June, 1967.

On 23rd July, 1967, a fire occurred at these premises which stopped production until 6th September, 1967, when production on a limited scale recommenced.

MEASUREMENT OF ATMOSPHERIC POLLUTION

For the purposes of the National Survey of Air Pollution, three volumetric instruments for the daily measurement of smoke and sulphur dioxide in the atmosphere in Chester were sited in the following types of areas until 31st March, 1967, when readings were discontinued by the Council:—

(a)—A Commercial District.

Health Department, Hunter's Walk.

(b)—A Residential District with a high population density.

The Elms, Hoole Road.

(c)—A Residential District with a low population density.

Blacon Infants' School, Carlisle Road.

The Annual Averages showing Smoke and Sulphur Dioxide concentrations (in microgrammes per cubic metre of air) at these sites over the six years during which readings were taken in Chester are as follows:—

		LTH	THE	ELMS		ACON HOOL
	Smoke	Sulphur Dioxide	Smoke	Sulphur Dioxide	Smoke	Sulphur Dioxide
1961	 142.0	149.4	214.8	167.3	+	+
1962	 148.6	141.9	206.5	149.4	111.5	84.8
1963	 146.6	188.3	189.3	189.2	130.9	140.8
1964	 131.75	182.4	186.2	189.0	125.0	125.6
1965	 112.0	124.0	174.0	148.5	100.0	86.4
1966	 78.75	94.8	151.3	115.0	91.4	75.8

^{*}Readings commenced 1st January, 1962

FOOD HYGIENE (GENERAL) REGULATIONS, 1960

Detailed inspections of food premises continued during the year.

On initial inspection, the premises were classified following consideration of (a) suitability of premises, (b) type and condition of equipment, (c) methods employed and (d) general standards of hygiene.

Where necessary, the attention of proprietors and management was called by interview and letter to defects, etc., requesting compliance with the Regulations and co-operation in order to improve the grading classification of premises.

Such co-operation is usually given willingly, resulting in an improvement in standards without need for statutory action.

The following table shows the classification of food premises at the end of 1967:—

Excelle	nt	90
Good	•••••	.420
Fair		188
Poor		1
Bad .		
	TOTAL	699
	101112	

The following is a list of the food premises in the City, classified by the main type of food business carried on, showing those which comply with Regulations 16 (provision of wash-hand basins, hot and cold water, soap, nail brushes and clean towels) and Regulations 19 (provision of sinks and hot and cold water, etc.) of the Food Hygiene (General) Regulations, 1960:

	No. of Premises	No. fitted to comply with Regulation 16	No. to which Regulation 19 applies	No. of Premises fitted to comply with Regulation 19
Bakehouses	7	7	7	7
Butchers' Shops and Meat Depots	61	60	61	60
Cake Shops	20	19	20	20
Canteens	44	44	44	44
Fishmongers	22	22	22	22
Fried Fish Shops	20	20	20	20
General Provisions Shops	122	121	122	121
Greengrocers	52	49	52	52
Hotels and Guest Houses	33	33	33	33
Licensed Premises	161	161	161	161
Restaurants, Cafes and Snack Bars	57	57	57	57
Sweet and Ice Cream Shops	84	83	81	81
Other Food Premises	16	16	16	16

Eighty-four inspections of stalls which include food vehicles were also made during the year under the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966.

Lectures and demonstrations have been given to staffs of food premises and various organisations on the principles of food hygiene and the potential dangers due to the neglect of personal and kitchen hygiene.

Two courses each of 14 lectures on food hygiene were also given to food handlers by one of the Public Health Inspectors at the College of Further Education. The courses were based on the syllabus of the Royal Society of Health and, after both written and oral external examination at the termination of the courses, a qualifying Diploma certificate was issued by the Society to 42 successful candidates.

LICENSED PREMISES

One hundred and sixty-five visits were made to licensed premises and a comprehensive report submitted to the Licensing Justices. The premises were also inspected regarding their compliance with the Food Hygiene (General) Regulations, 1960, and where necessary attention has been called to any matters required for compliance with the Regulations.

A few licensed premises have closed. Works of improvement and modernisation continued steadily, and with two exceptions which have since been dealt with, the general standard of hygiene and cleanliness was good.

FOOD AND DRUGS ACT, 1955

Table showing administrative action in respect of samples certified as being not genuine.

	able notices to be	of both the manusor the result of the se to be suitably
Action taken and Remarks	With the approval of the City Council the matter was taken up with the retailer and arrangements made for suitable notices to be displayed in the shop.	By resolution of the City Council the attention of both the manufacturers and retailer of the cheese was drawn to the result of the analysis and arrangements made for the cheese to be suitably labelled.
Analyst's Report	(Informal) Cream Doughnuts It is a sample of doughnuts in which the filler consists of initation cream. Section 47 of the Food and Drugs Act 1955 prohibits the sale of any article of food containing a substance which resembles cream in appearance but is not cream.	It is a sample of cheese having the parts as under:— Fat Water Water The above composition corresponds with the description for full fat hard cheese. Regulations, 1965, requires cheese of this composition to carry the above description on a label. The sample did not contain this description.
Article	Cream Doughnuts	Cheese
Sample No.	133 (Informal)	(Informal)

ufac-

FOOD AND DRUGS ACT, 1955—contd.

Table showing administrative action in respect of samples certified as being not genuine.

Action taken and Remarks	By resoultion of the City Council the attention of the manu turers of the omelette was drawn to the result of the analysis.	
Analyst's Report	It is an article containing two separate mixtures on which the ingredients are not listed on the innermost wrappers or containers.	Article 4(1) of the Labelling of Food Order, 1953, requires that if a food is prepacked in more than one wrapper or container, the innermost wrapper or container must contain a list of the ingredients. A list of the ingredients was given on the outer wrapper of this article, but not on the inner ones.
Article	Omelette (Spanish)	
Sample No.	168 (Informal) Omelette (Spanish)	

THE MILK AND DAIRIES (GENERAL) REGULATIONS, 1959

Part III of these Regulations requires the registration of persons carrying on the trade of Milk Distributor, and of premises which are used as dairies (not being Dairy Farms).

The following are premises within the City from which milk is sold:—

Premises registered as Dairies	 	 	4
Distributors with premises in the City	 	 	86

THE MILK (SPECIAL DESIGNATIONS) REGULATIONS, 1963 AND 1965

Two Dealer's (Pre-Packed Milk) Licences for the sale of designated milk were issued to cover the remainder of the five year period ending 31st December, 1970.

There are no milk heat treatment plants within the City.

MILK

Chemical Analysis

Total Samples Analysed	 	 	 53
Number certified 'not genuine'	 	 	 Nil

BACTERIOLOGICAL EXAMINATIONS

Results of the various tests applied to 76 samples of milk submitted for examination are shown in the following table:—

	No. of		Nur	nber
Designation	Samples	Test Applied	Passed	Failed
Pasteurised	25	Phosphatase Methylene Blue	25 25	
Pasteurised, Homogenised	14	Phosphatase Methylene Blue	14 14	_
Channel Island Pasteurised	7	Phosphatase Methylene Blue	7 7	_
Untreated, Farm Bottled or Cartoned	11	Methylene Blue	10	1
Sterilised	16	Turbidity	16	_
Ultra Heat Treated	3	Phosphatase Methylene Blue	3 3	-

NOTES:-

- (a) The 'Phosphatase Test' assesses the efficiency of pasteurisation.
- (b) The 'Methylene Blue Test' assesses keeping quality and cleanliness.

The attention of the Producer, Retailers and Ministry of Agriculture, Fisheries and Food was called to the unsatisfactory sample.

BIOLOGICAL EXAMINATIONS

(a) For Tuberculosis

Seven samples of Untreated Milk were sent to the Public Health Laboratory, Chester, for examination for the presence of tubercle bacillus.

All were certified to be negative.

(b) For Brucella Abortus

		Rest		Cultura	
No of Samples Examined	Ring Positive	Test Negative	Positive	Culture or G.P.I. Negative	
7 (Untreated Milk)	1	6	_	1	

Guinea Pig Inoculation and Culture Tests are carried out when samples are found to be Ring Test Positive, in order to confirm the presence or otherwise of the brucella organism.

The Liquid Egg (Pasteurised) Regulations, 1963

There are no egg pasteurisation plants in the district and no samples of liquid egg were submitted for the Alpha Amylase test during the year.

ICE CREAM

The fat content of the six samples analysed is shown in the following table:—

	FAT	CONT	ENT F	ER CE	NT.			
		Standar	d five p	er cent.		Numbe	r of Sar	nples
5 and under 6								_
6 and under 7	4		•••	•••				3
7 and under 8	•••	•••		•••	•••		•••	3

The samples also satisfied the tests for milk solids and were reported to be genuine.

Bacteriological Samples

Ice Cream (Heat Treatment, etc.) Regulations, 1959

During the year seven samples of ice cream were bacteriologically examined at the Public Health Laboratory, Chester.

Results:

	Number	of Samples
Grade 1—Satisfactory		5
Grade 2—Satisfactory		2

SLAUGHTER OF ANIMALS ACT, 1958

One new and 12 renewal licences were issued to Slaughtermen during the year.

All slaughtering of animals in the City for human consumption is carried out at the Public Abattoir, Sealand Trading Estate.

Animals slaughtered during 1967:—

				ТО	TAL	42093
Pigs				 	•••	5866
Sheep	•••			 • • •		29403
Calves		•••	• • •	 	•••	212
Cattle	• • •	•••		 •••	• • •	6612

MEAT AND FOOD INSPECTION

In accordance with the Meat Inspection Regulations, 1963, all animals slaughtered and meat dressed in the City are inspected by the Meat Inspector at the Abattoir.

Food condemned during the year amounted to:—

Mass and Offel as the Public	Tons	Cwts.	Qrs.	Lbs.
Meat and Offal at the Public Abattoir	24	16	2	18
Food at other premises throughout the City	9	13	1	17
TOTAL	34	10		7

The following tables show (1) percentage of animals affected with disease and (2) details of all food condemned.

TABLE I.

CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART

	Cattle excluding Cows	Cows	Calves	Sheep & Lambs	Pigs
Number killed	. 6396	216	212	29403	5866
Number inspected	. 6396	216	212	29403	5866
All Diseases except Tuberculosi and Cysticercus Bovis	s				
Whole carcases condemned	. 2	1	4	15	15
Carcases of which some part or organ was condemned		186	3	10425	2651
Percentage	. 60.97	87.5	3.30	35.51	45.45
Tuberculosis only					
Whole carcases condemned	_	_	_	_	_
Carcases of which some part of organ was condemned		_	_		2
Percentage	. 0.016	_	_	_	0.034
Cysticercosis					
Carcases of which some part of organ was condemned		_	_	_	_
Carcases submitted to treat	t- 12	_	_	_	_
Generalised & totally condemned	. —	_	_	_	_
Percentage	. 0.19	_	_	_	_

TABLE II. UNSOUND FOOD

Meat Condemned at Public Abattoir

Aı	ticle		lbs.	Reason for Condemnation
BEEF			•00.	reason for Condemnation
1 beast carcase			191	Johne's disease and emaciation
1 beast carcase			465	Acute septic metritis
1 beast carcase			410	Emaciation and Oedema
PORK				
2 pig carcases			171	Acute septic pleurisy
5 pig carcases			444	Acute septic pneumonia
1 pig carcase			101	Acute septic peritonitis
2 pig carcases			80	Emaciation and Oedema
4 pig carcases			401	Pyaemia
1 pig carcase	•••	• • •	99	Jaundice
LAMB				
11 sheep carcases			289	Emaciation and Oedema
1 sheep carcase			34	Febrility
2 sheep carcases			65	Moribund
1 sheep carcase		• • •	60	Septicaemia
VEAL				
2 calf carcases			109	Joint ill
1 calf carcase			55	Navel ill
1 calf carcase		•••	45	Septicaemia
VISCERA	'	•••	52284	Localised disease parasitic and other conditions

Other Food Condemned

MISCELLANEO	ous		lbs	
Tinned Food				Pierced, Blown, etc.
Other Food	•••	•••	 12132	Contamination, Decomposition, Infestation, etc.

POULTRY INSPECTION

There are no poultry processing premises in the City.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

This Act makes provision for the health, safety and welfare of persons employed in the above premises.

Registration and General Inspections

Class of Premises	Number of premises registered during 1967	Total number of registered premises at end of 1967	Number of registered premises receiving general inspection during the year		
Offices	38	347	63		
Retail Shops Wholesale Shops,	65	571	229		
Warehouses	6	40	9		
Catering Establishments open to the public, Canteens	6	96	25		
Fuel Storage Depots		_	_		
TOTALS	115	1054	326		
Number of visits of all Premises Analysis of persons employe		•••	39		
Premises		•••	39		
Premises Analysis of persons employed Class of Workplace Offices		•••	by workplace: Number of Persons Employe 4337		
Premises Analysis of persons employed Class of Workplace Offices Retail Shops	ed in Registere	•••	by workplace: Number of Persons Employe 4337 4806		
Premises Analysis of persons employed Class of Workplace Offices Retail Shops Wholesale Departments, Ware	ed in Registere	•••	39 by workplace: Number of Persons Employe 4337 4806 716		
Premises Analysis of persons employed Class of Workplace Offices Retail Shops Wholesale Departments, Ware Catering Establishments open	ed in Registere	•••	by workplace: Number of Persons Employe 4337 4806 716 1060		
Premises Analysis of persons employed Class of Workplace Offices Retail Shops Wholesale Departments, Ware Catering Establishments open Canteens	ed in Registere	•••	by workplace: Number of Persons Employe 4337 4806 716 1060 72		
Premises Analysis of persons employed Class of Workplace Offices Retail Shops	ed in Registere	•••	by workplace: Number of Persons Employe 4337 4806 716 1060 72 9		
Premises Analysis of persons employed Class of Workplace Offices Retail Shops Wholesale Departments, Ware Catering Establishments open Canteens	ed in Registere	od Premises	by workplace: Number of Persons Employe 4337 4806 716 1060 72 9 11000		
Premises Analysis of persons employed Class of Workplace Offices Retail Shops Wholesale Departments, Ware Catering Establishments open Canteens Fuel Storage Depots	ed in Registere	od Premises	by workplace: Number of Persons Employe 4337 4806 716 1060 72 9 11000 ales, 6,918 Female		
Premises Analysis of persons employed Class of Workplace Offices Wholesale Departments, Ware Catering Establishments open Canteens Fuel Storage Depots	ed in Registere	od Premises	by workplace: Number of Persons Employe 4337 4806 716 1060 72 9 11000 ales, 6,918 Female		
Premises Analysis of persons employed Class of Workplace Offices Retail Shops Wholesale Departments, Ware Catering Establishments open Canteens	ed in Registere	od Premises	by workplace: Number of Persons Employe 4337 4806 716 1060 72 9 11000 ales, 6,918 Female		

Other staff employed for most of its time on work in connection with the Act

Nil

ACCIDENTS

Accidents to persons employed in registered premises must be notified under the Act and the following tables show the number of accidents reported, the action taken following investigations and an analysis of the causes of the accidents:—

Reported Accidents

			Action Taken					
Workplace	Number Reported and Investigated	Presecution	Formal Warning	Informal Advice	No Action			
Offices	4	Nil	Nil	4	Nil			
Retail Shops	15	Nil	Nil	15	Nil			
Wholesale Shops, Warehouses	2	Nil	Nil	2	Nil			
Catering Establishments open to public,								
Canteens	10	Nil	Nil	10	Nil			
Fuel Storage Depots	Nil	Nil	Nil	Nil	Nil			
Totals	31	Nil	Nil	31	Nil			

Analysis of Reported Accidents

	Оffices	Retail Shops	Wholesalc Warchouses	Catering Establishments open to the Public, Canteens	Fuel Storage Depots
Machinery	Nil	1	1	2	Nil
Transport	Nil	1	Nil	Nil	Nil
Falls of Persons	Nil	6	Nil	3	Nil
Stepping on or striking against object					
or person	2	2	Nil	Nil	Nil
Handling goods	1	2	1	2	Nil
Struck by falling object	Nil	Nil	Nil	Nil	Nil
Fires and explosions	Nil	Nil	Nil	Nil	Nil
Electricity	Nil	Nil	Nil	Nil	Nil
Use of hand tools	1	2	Nil	2	Nil
Not otherwise specified	Nil	1	Nil	1	Nil

PREVENTION OF DAMAGE BY PESTS ACT, 1949 RODENT CONTROL

The sewer manholes in the central area of the City were treated with the poison fluoracetamide in the Spring, Summer and Autumn, in an endeavour to clear completely these sewers which were still infested last year.

During Spring and Autumn selected manholes were poisoned on the older sewers which have been infested in the past.

The Autumn treatment was preceded by a test bait and the results are given below:—

		Number of Manholes Poisoned in March	Results of Sept. Test Bait			
Area treated		and Oct. and Test Baited in September	C	P	N	
Garden Lane		6	_	_	6	
Newton		15	_		15	
Newtown		75	_	_	75	
Town		115	_	_	115	
Boughton		29		_	29	
Handbridge and Sa	ltney	41	_		41	
Hoole		6	_		6	
TOTALS		287		<u>.</u>	287	

C — Complete Take. P — Part Take. N — No Take.

The results this year show that the sewer treatments carried out over the last few years with fluoracetamide have finally completely cleared rats from the older sewers in the City.

Selective treatment of the sewers will continue in order to keep them clear of rats. It is not possible to guarantee that the sewers will be kept completely free from rats, but any re-infestation which may occur will be revealed by annual test baiting and should be very minor and readily controlled.

SURFACE INFESTATIONS

Besides treatment of the sewers; the refuse tip, sewage works, river and canal banks, together with building and demolition sites are kept under routine observation and treated when necessary. Regular inspections of

'black spots' (sites which have been subject to rat infestations in the past) which were commenced in 1965, were again increased in 1967, in a general move towards dealing with infestations in a preventive manner.

Number of 'black spots'		 • • •		140
Number of visits to 'black spots'		 	•••	530
Number of 'black spots' found infe	ested	 		19

The programme of sewer treatment and black spot inspection was carried out in consultation with and on the recommendation of the Regional Officer, Infestation Control Division of the Ministry of Agriculture, Fisheries and Food as part of a plan in which the Council is co-operating with the Ministry to reduce the rat population in the City.

Difficulty is still being experienced in dealing with mice which are confirmed to be resistant to Warfarin and which are present particularly in the central area of the City.

Public sewers, Corporation properties and all private houses are treated free of charge, whereas costs are recovered from the occupiers when commercial and industrial premises are treated.

The following shows the new form of Annual Report as required by the Ministry of Agriculture, Fisheries and Food.

RODENT CONTROL—REPORT FOR 1967

		TYPE OF P Non Agricultural	
1.	Number of Properties in District	23885	10
2.	(a) Total number of properties (including nearby premises) inspected following notifica-		
	tion	655	
	(b) Number infested by:		
	(i) Rats	219	
	(ii Mice	390	_
3.	(a) Total number of properties inspected for rats and/or mice for reasons other than		
	notification	140	_
	(b) Number infested by:		
	(i) Rats	19	_
	(ii) Mice		_
4.	Were any sewers infested by rats		
	during the year?	No	

PET ANIMALS ACT, 1951

The Act regulates conditions under which pets are kept for sale in shops.

Seven premises were licensed under the Act following inspection, all of which complied with the terms of the licenses.

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

This Act regulates the conditions in premises where animals are boarded.

Three premises were licensed under the Act following inspection.

COMMON LODGING HOUSES

There are no registered Common Lodging Houses within the City.

NOISE ABATEMENT ACT, 1960

The Act enables Local Authorities to deal with nuisance from noise and vibrations as a statutory nuisance in accordance with the provisions of Part III of the Public Health Act, 1936.

Three complaints were received during the year of noise nuisance and these were dealt with satisfactorily.

Three renewed complaints were also dealt with in respect of two premises.

LECTURES

During the year, lectures on various aspects of Environmental Hygiene were given to a number of organisations, students and nurses.

FACTORIES ACTS, 1961

PART I

1. Inspections.

			Number of	
Premises -	Number on Register	Inspections	Written Nötices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are enforced by Local Authorities	33	2	_	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	320	153	7	_
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-				
workers' premises)	6	_		_
TOTAL	359	155	7	_

2. Cases in which DEFECTS were found.

	No. of Cases in which defects were found					
Particulars	Found	Reme- died			No. of Caswhich Property	
Want of cleanliness (S.1)	_	_	_	_	_	
Overcrowding (S.2)	_	_	_	_	_	
Unreasonable temperature (S.3)	_	_	_	-	_	
Inadequate ventilation (S.4)	_	_	_	_	_	
Ineffective drainage of floors (S.6) Sanitary conveniences (S.7):		_	_	_	_	
(a) Insufficient	_	_	_	_	_	
(b) Unsuitable or defective	21	-	-	1	_	
(c) Not separate for sexes	1	_	_	_	_	
Other offences against the Act (Not including offences relating to Out work)	_	_	-	_	_	
TOTAL	22	_	_	1	_	

PART VIII OUTWORK (Sections 133 and 134)

NATURE OF WORK		SECTION 133			SECTION 134		
		No. of outworkers in August list required by Sect. 110(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
<u>(1)</u>		(2)	(3)	(4)	(5)	(6)	(7)
Wearing Apparel—Making, etc.		11	_	_	_	_	_
Carpet Fitter		1		_			_
Upholsterer	•••	1	_	_	_	_	_







